

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000090830

FILED
May 28, 2009
Secretary of State

Entity Name: EMERALD LOAN SERVICES, LLC

Current Principal Place of Business:

300 SE 5TH AVENUE, APT 5100
C/O ALAN COHEN
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

300 SE 5TH AVENUE, APT 5100
C/O ALAN COHEN
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 26-3480040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.
515 EAST PARK AVE.
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KANE, DANIEL
Address: 340 N. WESTLAKE BLVD.
City-St-Zip: WESTLAKE VILLAGE, CA 91362

Title: MGR () Delete
Name: COHEN, ALAN
Address: 300 SE 5TH AVENUE, APT 5100
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL KANE

MGR

05/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date