

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000054360

FILED
May 02, 2010
Secretary of State

Entity Name: FORECLOSURE ASSISTANCE AND RECOVERY, LLC

Current Principal Place of Business:

1520 BLUE POINT AVENUE
103
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1520 BLUE POINT AVENUE
103
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 27-0308947 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

CRAIG D. BLUME, P.A.
800 HARBOUR DRIVE
NAPLES, FL 34103 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
Name: BELZ, JOE
Address: 1520 BLUE POINT AVENUE #103
City-St-Zip: NAPLES, FL 34102 US

Title: MGR
Name: MUELLER, RAND
Address: 455 COVE TOWERS #1104
City-St-Zip: NAPLES, FL 34110 US

I hereby 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: JOE BELZ

MGR

05/02/2010

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