


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L98000001086 1. Entity Name U.S. FUNDING GROUP, LLC	
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Principal Place of Business P.O. BOX 35246 SARASOTA, FL 34278	Mailing Address P.O. BOX 35246 SARASOTA, FL 34278
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DO NOT WRITE IN THIS SPACE



01212007No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-0851073	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

HESTER, GORDON D
5379 OCEAN BLVD
SARASOTA, FL 34242

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

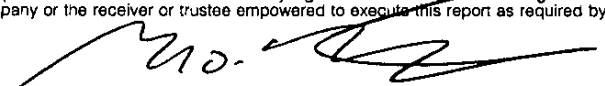
**Filing Fee is \$50.00
Due by May 1, 2007**

U000000668571
03/23/07-80074-015 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBERT, JEFF D 5379 OCEAN BLVD SARASOTA, FL 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HESTER, GORDON D 5379 OCEAN BLVD SARASOTA, FL 34242
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **3-8-07** **941-346-7300**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #