

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M04000000447**

1. Entity Name  
NOLA LENDING GROUP, L.L.C.



Principal Place of Business

#4 SANCTUARY BLVD.  
SUITE 201  
MANDEVILLE, LA 70471

Mailing Address

#4 SANCTUARY BLVD  
SUITE 201  
MANDEVILLE, LA 70471

**DO NOT WRITE IN THIS SPACE**



01252007No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
71-0898827

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

COMPLIANCE CONSULTING CORPORATION OF FL  
521 LAKE AVE, STE 4  
LAKE WORTH, FL 33460

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	NOEL, ASHTON
STREET ADDRESS	#4 SANCTUARY BLVD. SUITE 201
CITY-ST-ZIP	MANDEVILLE, LA 70471
TITLE	MGR
NAME	LANASA, RICHARD
STREET ADDRESS	#4 SANCTUARY BLVD. SUITE #201
CITY-ST-ZIP	MANDEVILLE, LA 70471
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000610413  
02/02/07-80020-015 55.00

**DO NOT WRITE  
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:**

Richard LaNasa. Owner/Managing Partner 1/25/07 985-951-8479

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #