2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M05000003624

1. Entity Name

AMERIFIRST NATIONAL FINANCIAL OF BOCA RATON, L.L.C.



FILED Mar 20, 2006 08:00 AM Secretary of State

Principal Place of Business

2536 COUNTRYSIDE BLVD., 6TH FLOOR CLEARWATER, FL 33763

Malling Address

2536 COUNTRYSIDE BLVD., 6TH FLOOR CLEARWATER, FL 33763



02032006 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	20-2624837

Applied For Nat Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regulard

127-726-0726

6. Name and Address of Current Registered Agent

NORTH, TIMOTHY O 2536 COUNTRYSIDE BLVD., 6TH FL CLEARWATER, FL 33763

SIGNATURE:

SIGNATURE AND TYPED

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 approable		(NOTE: Registered Agent signature required when roinslating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2006				
9.	MANAGING MEMBERS/MANAGERS	<u> </u>	V #	
TYTLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NORTH, TIMOTHY 2536 COUNTRYSIDE BLVD., 6TH FLOOR CLEARWATER, FL 33763			
TITLE NAME STREET ADDRESS C/TY-ST-ZIP			U00000474884 04/04/06-80041-014 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CLIY-ST-ZIP				
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.				

OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

TIMOTHY O NORTH.