

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000003779

FILED
Jan 06, 2009
Secretary of State

Entity Name: BUCKEYE COMMERCIAL CHECK CASHING OF FLORIDA, LLC

Current Principal Place of Business:

7001 POST ROAD, SUITE 200
DUBLIN, OH 43016

New Principal Place of Business:

Current Mailing Address:

7001 POST ROAD, SUITE 200
DUBLIN, OH 43016

New Mailing Address:

FEI Number: 26-0270715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: FRAUENBERG, JAMES H
Address: 7001 POST ROAD, SUITE 200
City-St-Zip: DUBLIN, OH 43016

Title: MGR () Delete
Name: STREFF, CHAD M
Address: 7001 POST ROAD, SUITE 200
City-St-Zip: DUBLIN, OH 43016

Title: MGR () Delete
Name: SAUNDERS, WILLIAM E JR.
Address: 7001 POST ROAD, SUITE 200
City-St-Zip: DUBLIN, OH 43016

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HANSON, KYLE F
Address: 7001 POST ROAD, SUITE 200
City-St-Zip: DUBLIN, OH 43016

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

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

Title: MGR () Change (X) Addition
Name: ROMAN, BRIDGETTE C
Address: 7001 POST ROAD, SUITE 200
City-St-Zip: DUBLIN, OH 43016

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: BRIDGETTE C. ROMAN

MGR

01/06/2009

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