2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 12, 2012
Secretary of State

DOCUMENT# M10000003781

Entity Name: LENDERVEND, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1633 BAYSHORE HWY STE 135 BURLINGAME, CA 94010	851 TRAEGER AVE SUITE 100 SAN BRUNO, CA 94066

Current Mailing Address:	**New Mailing Address:**
1633 BAYSHORE HWY STE 135 BURLINGAME, CA 94010	851 TRAEGER AVE SUITE 100 SAN BRUNO, CA 94066

FEI Number: 27-0938543   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:	PICA, R. CRAIG
Address:	851 TRAEGER AVE, SUITE 100
City-St-Zip:	SAN BRUNO, CA 94066

Title:	MGR
Name:	PICA, RALPH
Address:	851 TRAEGER AVE, SUITE 100
City-St-Zip:	SAN BRUNO, CA 94066

Title:	MGR
Name:	PICA, DOUG
Address:	851 TRAEGER AVE, SUITE 100
City-St-Zip:	SAN BRUNO, CA 94066

Title:	MGR
Name:	BLAKE, MICHELLE
Address:	851 TRAEGER AVE, SUITE 100
City-St-Zip:	SAN BRUNO, CA 94066

Title:	MGR
Name:	PRASAD, NOEL
Address:	851 TRAEGER AVE, SUITE 100
City-St-Zip:	SAN BRUNO, CA 94066

Title:	MGR
Name:	MICHAEL, KIWATA
Address:	851 TRAEGER AVE, SUITE 100
City-St-Zip:	SAN BRUNO, CA 94066

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 Statues.

SIGNATURE: MICHAEL KIWATA   MGR   03/12/2012

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