

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012159

FILED  
Apr 04, 2007  
Secretary of State

Entity Name: CROSS COUNTRY LENDING GROUP, INC.

**Current Principal Place of Business:**

5575 S. SEMORAN BLVD., #5013  
ORLANDO, FL 328221747

**New Principal Place of Business:**

5575 S. SEMORAN BLVD.,  
#5013  
ORLANDO, FL 328221747

**Current Mailing Address:**

5575 S. SEMORAN BLVD., #5013  
ORLANDO, FL 328221747

**New Mailing Address:**

FEI Number: 20-2289206      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOMEZ, CARIDAD  
10700 N. KENDALL DRIVE  
SUITE 400  
MIAMI, FL 33176 US

**Name and Address of New Registered Agent:**

LOPEZ, IVETTE  
11500 SW 101 AVENUE  
MIAMI, FL 33176 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: IVETTE LOPEZ

04/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LOPEZ, YVETTE  
Address: 11500 SW 101 AVE.  
City-St-Zip: MIAMI, FL 33176  
  
Title: VP (X) Delete  
Name: GOMEZ, CARIDAD  
Address: 10700 N. KENDALL DR., #400  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LOPEZ, IVETTE  
Address: 11500 SW 101 AVE.  
City-St-Zip: MIAMI, FL 33176  
  
Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IVETTE LOPEZ

P

04/04/2007

Electronic Signature of Signing Officer or Director

Date