

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P96000060107

**FILED**  
**Jul 15, 2008**  
**Secretary of State****Entity Name:** FIRST LENDERS FINANCIAL GROUP, INC.**Current Principal Place of Business:**1600 E. ROBINSON ST.  
400  
ORLANDO, FL 32803 US**New Principal Place of Business:**1600 E. ROBINSON ST.  
250  
ORLANDO, FL 32803 US**Current Mailing Address:**1600 E. ROBINSON ST.  
400  
ORLANDO, FL 32803 US**New Mailing Address:**1600 E. ROBINSON ST.  
250  
ORLANDO, FL 32803 US**FEI Number:** 59-3388840**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GARCIA, MARIO  
400 N. FERNCREEK AVENUE  
LAW OFFICES OF MARIO GARCIA PA  
ORLANDO, FL 32803 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

**OFFICERS AND DIRECTORS:****Title:** D ( ) Delete  
**Name:** CAMACHO, JOSE  
**Address:** 1600 E. ROBINSON STREET  
**City-St-Zip:** ORLANDO, FL 32803 US**Title:** D ( ) Delete  
**Name:** JAMES, SCOTT  
**Address:** 1600 E. ROBINSON STREET  
**City-St-Zip:** ORLANDO, FL 32803 US**Title:** D ( ) Delete  
**Name:** DEMARTA, JANNA  
**Address:** 1600 E ROBINSON ST  
**City-St-Zip:** ORLANDO, FL 32803**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** P/D (X) Change ( ) Addition  
**Name:** SCOTT, JAMES M  
**Address:** 1600 E. ROBINSON STREET  
**City-St-Zip:** ORLANDO, FL 32803 US**Title:** VP/D (X) Change ( ) Addition  
**Name:** STEPHENS, M J  
**Address:** 1600 E ROBINSON ST  
**City-St-Zip:** ORLANDO, FL 32803

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 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: JAMES M SCOTT

PRES

07/15/2008

Electronic Signature of Signing Officer or Director

Date