

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000038308

**Entity Name:** FIRST TRUST FUNDING GROUP, LLC

**Current Principal Place of Business:**

1180 GULF BLVD., STE 2201  
CLEARWATER, FL 33767

**Current Mailing Address:**

1180 GULF BLVD., STE 2201  
CLEARWATER, FL 33767 US

**FEI Number:** 81-2314381

**Certificate of Status Desired:** No

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

SCARPO, ANTHONY L  
500 NORTH WESTSHORE BLVD.  
910  
TAMPA, FL 33609 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

**Authorized Person(s) Detail :**

|                 |                           |                 |                           |
|-----------------|---------------------------|-----------------|---------------------------|
| Title           | MGR                       | Title           | MGR                       |
| Name            | SCARPO, BARBARA B         | Name            | SCARPO, ANTHONY L         |
| Address         | 1180 GULF BLVD., STE 2201 | Address         | 1180 GULF BLVD., STE 2201 |
| City-State-Zip: | CLEARWATER FL 33767       | City-State-Zip: | CLEARWATER FL 33767       |

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANTHONY SCARPO

MGR

04/04/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date