

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016795

FILED
May 01, 2006
Secretary of State

Entity Name: FLEET STREET MORTGAGE, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

2121 PONCE DE LEON BOULEVARD
SUITE 711
CORAL GABLES, FL 33134 US

New Principal Place of Business:

19101 SW 270 ST
HOMESTEAD, FL 33031 US

Current Mailing Address:

2121 PONCE DE LEON BOULEVARD
SUITE 711
CORAL GABLES, FL 33134 US

New Mailing Address:

19101 SW 270 ST
HOMESTEAD, FL 33031 US

FEI Number: 80-0099673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHECHNER, MARK S
2121 PONCE DE LEON BOULEVARD
SUITE 711
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

JOHNSON, WINSTON
19101 SW 270 ST
HOMESTEAD, FL 33031 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: WINSTON JOHNSON

05/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JOHNSON, WINSTON
Address: 2121 PONCE DE LEON BOULEVARD, SUITE 711
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOHNSON, WINSTON
Address: 19101 SW 270 ST
City-St-Zip: HOMESTEAD, FL 33031 US

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 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: WINSTON JOHNSON

MGR

05/01/2006

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