

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073747

**FILED**  
**Apr 18, 2005**  
**Secretary of State**

**Entity Name:** FLORIDA HOME MORTGAGE LLC

**Current Principal Place of Business:**

10200 STATE RD 84  
SUITE 107  
DAVIE, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

10200 STATE RD 84  
SUITE 107  
DAVIE, FL 33324 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

DONOFRIO, RON  
11185 NW 2ND CT  
CORAL SPRINGS, FL 33071 US

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

DONOFRIO, RON  
10200 STATE RD 84  
SUITE 107  
DAVIE, FL 33324 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: \_\_\_\_\_ 04/18/2005  
Electronic Signature of Registered Agent                      Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: FLORIDA HOME REALTY,  
Address: 10200 STATE RD 84 SUITE 107  
City-St-Zip: DAVIE, FL 33324 US

**ADDITIONS/CHANGES:**

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 Section 119.07(3)(i), 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: DONOFRIO, RON                      MGR                      04/18/2005  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date