

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002642

Entity Name: ACCUNETMORTGAGE.COM LLC

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

13000 W. SILVER SPRING DR.
BUTLER, WI 53007 US

New Principal Place of Business:

Current Mailing Address:

13000 W. SILVER SPRING DR.
BUTLER, WI 53007 US

New Mailing Address:

FEI Number: 39-1968140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORIDA COMPLIANCE SPECIALISTS, INC.
2331 HANSEN PLACE
TALLAHASSEE, FL 32301 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: WICKERT, BRIAN J MGR
Address: 2415 SHELLY COURT
City-St-Zip: BROOKFIELD, WI 53045

Title: MGR () Delete
Name: STADLER, LOUIS J MGR
Address: W157 N7428 STONEWOOD CIRCLE
City-St-Zip: MENOMONEE FALLS, WI 53051

Title: MGR () Delete
Name: VOELZ, JOHN R MGR
Address: 652 MCCARTHY DR.
City-St-Zip: HARTFORD, WI 53027

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: VOELZ, JOHN R MGR
Address: N87 W27155 PERENNIAL TERRACE
City-St-Zip: HARTLAND, WI 53029

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: BRIAN J WICKERT

MGR

04/26/2005

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