

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003639

FILED  
Apr 22, 2008  
Secretary of State

Entity Name: SPECIALIZED LOAN SERVICING LLC

**Current Principal Place of Business:**

8742 LUCENT BLVD.  
SUITE 300  
HIGHLANDS RANCH, CO 80129 US

**New Principal Place of Business:**

**Current Mailing Address:**

8742 LUCENT BLVD.  
SUITE 300  
HIGHLANDS RANCH, CO 80129

**New Mailing Address:**

8742 LUCENT BLVD.  
SUITE 300  
HIGHLANDS RANCH, CO 80129 US

FEI Number: 33-1050584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BEGGINS, JOHN C  
Address: 8742 LUCENT BLVD., SUITE 300  
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: MGRM ( ) Delete  
Name: WELLS, TOBY E  
Address: 8742 LUCENT BLVD., SUITE 300  
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: MGRM ( ) Delete  
Name: HARALSON, ALI M  
Address: 8742 LUCENT BLVD., SUITE 300  
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: MGRM ( ) Delete  
Name: WINTER, RICHARD D  
Address: 45 ROCKEFELLER PLAZA, SUITE 420  
City-St-Zip: NEW YORK, NY 10111

Title: MGRM ( ) Delete  
Name: TARTAGLIA, JOHN A  
Address: 45 ROCKEFELLER PLAZA, SUITE 420  
City-St-Zip: NEW YORK, NY 10111

Title: MGRM ( ) Delete  
Name: DOYLE, PATRICK K  
Address: ONE EMBARCADERO CENTER, SUITE 1530  
City-St-Zip: SAN FRANCISCO, CA 94111

**ADDITIONS/CHANGES:**

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

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

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

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

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

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

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 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: JOHN C. BEGGINS

MGRM

04/22/2008

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