

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001790

FILED
Apr 14, 2009
Secretary of State

Entity Name: USA MORTGAGE PROVIDERS, LLC

Current Principal Place of Business:

1777 REISTERTOWN ROAD
SUITE 345
PIKESVILLE, MD 21208

New Principal Place of Business:

Current Mailing Address:

1777 REISTERTOWN ROAD
SUITE 345
PIKESVILLE, MD 21208

New Mailing Address:

FEI Number: 01-0723408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: BOND, STEVE
Address: 1777 REISTERSTOWN ROAD, SUITE 345
City-St-Zip: PIKESVILLE, MD 21208

Title: PVST () Delete
Name: BOND, STEVE
Address: 3707 BIRCHMERE COURT
City-St-Zip: OWINGS MILLS, MD 21117

ADDITIONS/CHANGES:

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: STEVE BOND

PRES

04/14/2009

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