


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2006 08:00 AM
Secretary of State

DOCUMENT # M04000004438 1. Entity Name GENWORTH MORTGAGE SERVICES, LLC	
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Principal Place of Business 6601 SIX FORKS ROAD RALEIGH, NC 27615	Mailing Address 6601 SIX FORKS ROAD RALEIGH, NC 27615
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DO NOT WRITE IN THIS SPACE

04212006No Chg-LLC	CR2E083 (11/05)
4. FEI Number 02-0731589	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$50.00 Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEAHY, LORRAINE Z 7121 TRENTON RIDGE COURT RALEIGH, NC 27613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DALL, MARCIA A 2900 AQUILLA WAY RALEIGH, NC 27611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RABITZ, JOANN B 6312 MOUNTAIN GROVE LANE WAKE FOREST, NC 27587
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 05/19/06-80064-014 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Marcia A. Dall Date: April 27, 2006 Daytime Phone #: 919/846-4100