

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000178808

Entity Name: SECURE REVERSE MORTGAGE LLC

Current Principal Place of Business:

1231 S. OTTO PT.
INVERNESS, FL

Current Mailing Address:

1231 S. OTTO PT.
INVERNESS, FL 34450

FEI Number: 47-2350257

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, BOBBY R
1231 S. OTTO PT.
INVERNESS, FL 34450 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name SMITH, BOBBY R
Address 1231 S. OTTO PT.
City-State-Zip: INVERNESS FL 34450

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BOBBY R SMITH

OWNER/PRESIDENT

04/24/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date