

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001802

Entity Name: LMU FINANCIAL, INC.

FILED
Jan 25, 2007
Secretary of State

Current Principal Place of Business:

65 ENTERPRISE
ALISO VIEJO, CA 92656

New Principal Place of Business:

28202 CABOT ROAD, SUITE #435
LAGUNA NIGUEL, CA 92677

Current Mailing Address:

65 ENTERPRISE
ALISO VIEJO, CA 92656

New Mailing Address:

28202 CABOT ROAD, SUITE #435
LAGUNA NIGUEL, CA 92677

FEI Number: 20-3997179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICENSE AND COMPLIANCE RESOURCE, LLC
245 GRAY STREET
WEST PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

LICENSE AND COMPLIANCE RESOURCE I, LLC
245 GRAY STREET
WEST PALM BEACH, FL 33405 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: MAX LEWIS

01/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDPS () Delete
Name: UBER, LOREN
Address: 65 ENTERPRISE
City-St-Zip: ALISO VIEJO, CA 92656

Title: T (X) Delete
Name: UBER, LOREN
Address: 65 ENTERPRISE
City-St-Zip: ALISO VIEJO, CA 92656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: UBER, LOREN
Address: 28202 CABOT ROAD, SUITE #435
City-St-Zip: LAGUNA NIGUEL, CA 92677

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOREN UBER

PTSD

01/25/2007

Electronic Signature of Signing Officer or Director

Date