2007 LIMITED LIABILITY COMPANY

ANNUAL REPORT

DOCUMENT # L0000001420

VERMILLION MORTGAGE, L.L.C.



Principal Place of Business

3298 SUMMIT BLVD., #29 PENSACOLA, FL 32503

Mailing Address

3298 SUMMIT BLVD., #29 PENSACOLA, FL 32503

FILED Apr 02, 2007 08:00 AM Secretary of State



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01162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 91-2020347 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NEELY, MICHELLE 1392 AUTUMN BREEZE CIR. GULF BREEZE, FL 32563

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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, typad or printed name of registered agent and title if applicable

(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

MANAGING MEMBERS/MANAGERS ITLE MGR NEELY, MICHELLE NAME 1392 AUTUMN BREEZE CIR. STREET ADDRESS CITY-ST-ZIP GULF BREEZE, FL 32561 MGR TITLE COOK, JAMES M NAME STREET ADDRESS 3298 SUMMIT BLVD. #29 PENSACOLA, FL 32503 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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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 of mpany p the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #