## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012551

Entity Name: SUPERIOR UNIVERSAL MORTGAGE, LLC

**FILED** Apr 26, 2006 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

2710 N. ORANGE BLOSSOM TRAIL, SUITE 202 2710 NORTH ORANGE BLOSSOM TRAIL KISSIMMEE, FL 34744

SUITE 202

KISSIMMEE, FL 34744

**Current Mailing Address:** New Mailing Address:

2710 N. ORANGE BLOSSOM TRAIL, SUITE 202 2710 NORTH ORANGE BLOSSOM TRAIL

KISSIMMEE, FL 34744 SUITE 202

KISSIMMEE, FL 34744

FEI Number: 59-3678046 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILSON, CHRIS WILSON, CHRIS 2710 NORTH ORANGE BLOSSOM TRAIL 2740 KISSIMMEE BAY CIRCLE

KISSIMMEE, FL 34744 SUITE 202 KISSIMMEE, FL 34744 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: 04/26/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

( ) Delete Title: (X) Change ( ) Addition

WILSON, CHRIS WILSON, CHRIS Name: Name:

Address: 2740 KISSIMMEE BAY CIRCLE Address: 2710 NORTH ORANGE BLOSSOM TRAIL, SUITE 202

City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: CHRIS WILSON 04/26/2006