

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001960

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** HOMEBUYERS MORTGAGE NETWORK, LLC

**Current Principal Place of Business:**

7900 MIAMI LAKES DRIVE WEST  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

17911 VON KARMAN AVE  
SUITE 300  
IRVINE, CA 92614

**New Mailing Address:**

C/O LEGAL DEPT.  
601 RIVERSIDE AVE.  
JACKSONVILLE, FL 32204

**FEI Number:** 65-1076025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRAFMAN, HOWARD J  
7900 MIAMI LAKES DRIVE WEST  
STE 100  
MIAMI LAKES, FL 33016 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HOMEBUILDERS FINANCI, AL NETWORK, IN C .  
Address: 7900 MIAMI LAKES DR W., ST 200  
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR ( ) Delete  
Name: JOHNSON, TODD C  
Address: 601 RIVERSIDE AVE.  
City-St-Zip: JACKSONVILLE, FL 32204

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: FOLEY, WILLIAM P II  
Address: 601 RIVERSIDE AVE.  
City-St-Zip: JACKSONVILLE, FL 32204

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

Title: MGR ( ) Change (X) Addition  
Name: KENNEDY, LEE A  
Address: 601 RIVERSIDE AVE.  
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGR ( ) Change (X) Addition  
Name: CARBIENER, JEFFREY S  
Address: 601 RIVERSIDE AVE.  
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGR ( ) Change (X) Addition  
Name: GRAVELLE, MICHAEL L  
Address: 601 RIVERSIDE AVE.  
City-St-Zip: JACKSONVILLE, FL 32204

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 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: TODD C JOHNSON

MGR

04/27/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date