


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90031 028 ****50.00

DOCUMENT # L01000003075 1. Entity Name ROYAL PALM MORTGAGE GROUP, LLC	
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Principal Place of Business 450 EAST LAS OLAS BLVD. 15TH FLOOR FT. LAUDERDALE, FL 33301	Mailing Address C/O CRIS BRANDEN 450 EAST LAS OLAS BLVD., 15TH FLOOR FT. LAUDERDALE, FL 33301
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01062005No Chg-LLC

CR2E083 (10/03)

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4. FEI Number 65-1099786	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. ONE SOUTHEAST THIRD AVE. 28TH FLOOR MIAMI, FL 33131

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BRANDEN, CRIS V 450 EAST LAS OLAS BLVD., 15TH FLOOR FT. LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANDLEY, RICHARD 450 EAST LAS OLAS BLVD., 15TH FLOOR FT. LAUDERDALE, FL 33301
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #