2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 08, 2004 08:00 AM Secretary of State **DOCUMENT # L01000006399** G N MORTGAGE PARTNERS, L.L.C. Principal Place of Business Mailing Address 35095 U.S. HIGHWAY 19 NORTH 35095 U.S. HIGHWAY 19 NORTH PALM HARBOR, FL 34684 PALM HARBOR, FL 34684 01262004 No Chq-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3733172 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SUBALDINI, NICOLA DO NOT WRITE '34866 U.S. HIGHWAY 19 NORTH PALM HARBOR, FL 34684 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS UUUUUUUU0080679 9. 03/08/04-80118-019 50.00 TITLE MGR NAME U-STAR, INC. STREET ADDRESS 35095 U.S. HIGHWAY 19 NORTH CITY-ST-ZIP PALM HARBOR, FL 34684 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CSTY-ST-78 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 of the receiver or trustee employered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS CITY-ST-ZIP

2/9/04

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