2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2005 8:00 am
Secretary of State
02-04-2005 90102 007 ****50.00

DOCUMENT # L01000009878

1. Entity Name
PREMIER MORTGAGE OF OCALA, LLC

Principal Place of Business	Mailing Address
2300 S. PINE AVENUE OCALA, FL 34471	2300 S. PINE AVENUE OCALA, FL 34471

02012005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
1910 SW 18th Ct.	1910 SW 18th Ct.
Suite, Apt. #, etc.: Bldg. 200	Suite, Apt. #, etc.: Bldg. 200
City & State: Ocala, FL	City & State: Ocala, FL
Zip: 34474 Country: USA	Zip: 34474 Country: USA

4. FEI Number: 59-3721389 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DEICHMAN, NANCY 2300 SOUTH PINE AVE. OCALA, FL 34471	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed 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, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR LAROSS, CAROLYN 2300 S. PINE AVENUE OCALA, FL 34471	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change 1910 SW 18th Ct Bldg. 200 Ocala, FL 34474	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR DEICHMAN, NANCY J 2300 S PINE AVE. OCALA, FL 34471	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change 1910 SW 18th Ct. Bldg. 200 Ocala, FL 34474	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR DEICHMAN, ROBERT R 2300 S. PINE AVE. OCALA, FL 34471	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change 1910 SW 18th Ct Bldg. 200 Ocala, FL 34474	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Ryder, Kenneth 1910 SW 18th Ct Bldg. 200 Ocala, FL 34474	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 608, Florida Statutes.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #