2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2005
Secretary of State

DOCUMENT# L02000019064

Entity Name: FIRST FAMILY MORTGAGE LENDING LLC.

Current Principal Place of Business:

201 EASTPARK DR.
CELEBRATION, FL 34747 US

New Principal Place of Business:

102 PARK PLACE BLVD. STE. A-3
KISSIMMEE, FL 34741 US

Current Mailing Address:

201 EASTPARK DR.
CELEBRATION, FL 34747 US

New Mailing Address:

102 PARK PLACE BLVD. STE. A-3
KISSIMMEE, FL 34741 US

FEI Number: 27-0024145 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PANKALLA, SEAN P
201 EASTPARK DR.
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

RUMLEY, MICHAEL R
3245 HAWKS NEST DR.
KISSIMMEE, FL 34741 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: MICHAEL R. RUMLEY 02/04/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: PANKALLA, SEAN P
Address: 201 EASTPARK DR.
City-St-Zip: CELEBRATION, FL 34747

Title: MGRM ( ) Delete
Name: RUMLEY, MIKE R
Address: 201 EASTPARK DR.
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: RUMLEY, MIKE R
Address: 3245 HAWKS NEST DR.
City-St-Zip: KISSIMMEE, FL 34741

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SEAN P. PANKALLA CEO 02/04/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date