

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000026395

FILED
Jul 10, 2006
Secretary of State**Entity Name:** MORTGAGE STRATEGIES, LLC**Current Principal Place of Business:**2582 S. MAGUIRE RD.
SUITE 108
OCOOE, FL 34761**New Principal Place of Business:****Current Mailing Address:**2582 S. MAGUIRE RD.
SUITE 108
OCOOE, FL 34761**New Mailing Address:****FEI Number:** 57-1167146**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HUMPHREY, DAVID C
2582 S. MAGUIRE RD.
SUITE 108
OCOOE, FL 34761 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:** MGR () Delete
Name: HUMPHREY, DAVID C
Address: 2582 S. MAGUIRE RD., SUITE 108
City-St-Zip: OCOOE, FL 34761 US**Title:** MGRM (X) Delete
Name: STEFAN, YOUNG
Address: 2582 S. MAGUIRE RD., SUITE 108
City-St-Zip: OCOOE, FL 34761**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID C HUMPHREY

MGR

07/10/2006

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