## 2004 LIMITED LIABILITY COMPANY

## ANNUAL REPORT FILED **DOCUMENT # L02000032329** Feb 02, 2004 08:00 AM RELIABLE MORTGAGE, LLC **Secretary of State** Principal Place of Business Mailing Address 225 MAIN STREET, SUITE #14 225 MAIN STREET, SUITE #14 DESTIN, FL 32541 DESTIN, FL 32541 01292004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 81-0585307 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WEST, ROBERT DO NOT WRITE 4626 DELWOOD VIEW BLVD. PANAMA CITY BEACH, FL 32418 IN THIS SPACE 8. The above named entity submits this plagement 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 ager (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME WEST, ROBERT U00000025597 4626 DELWOOD VIEW BLVD. STREET ADDRESS 02/02/04-80110-024 50.00 CITY-ST-ZIP PANAMA CITY BEACH, FL 32418 MGRM TIME PHILPOT, JOHN NAME STREET ADDRESS 1717 COLONIAL CT. CITY-ST-ZIP FT.WALTON BEACH, FL 32547 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 of injected impowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-7IP

MANAGEIG MEMBER, OR AUTHORIZED REPRESENTATIVE