

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032669

FILED  
Apr 07, 2006  
Secretary of State

**Entity Name:** FLEMING MORTGAGE SERVICES, LLC.

**Current Principal Place of Business:**

2123 SW 20TH PLACE  
SUITE 102  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

2123 SW 20TH PLACE  
SUITE 102  
OCALA, FL 34474

**New Mailing Address:**

**FEI Number:** 13-4229448

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ACKERMAN, CATHERINE F  
500 NE 8TH AVE  
OCALA, FL 34470 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: FLEMING, WILLIAM H  
Address: 4890 SW 14TH AVE  
City-St-Zip: OCALA, FL 34476

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: FLEMING, WILLIAM H  
Address: 9389 SW 14TH AVE  
City-St-Zip: OCALA, FL 34476

Title: ACC ( ) Change (X) Addition  
Name: WITTERS, MARYANN ACC MNG  
Address: 10686 SE 129 LN  
City-St-Zip: BELLEVIEW, FL 34420 US

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: MARYANN WITTERS

ACC

04/07/2006

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