

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034900

FILED
Feb 16, 2004
Secretary of State

Entity Name: OLYMPIA MORTGAGE COMPANY OF FORT MYERS, L.L.C.

Current Principal Place of Business:

455 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

455 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCHNELL, DON
455 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904 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/MEMBERS:

Title: MGR () Delete
Name: SCHNELL, DON A MANAGER
Address: 1711 SE 10TH AVENUE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: MGR () Delete
Name: SANVIDGE, DAVID W MANAGER
Address: 5513 HARBOUR CIRCLE
City-St-Zip: CAPE CORAL, FL 33914 US

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 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: DON SCHNELL MGR 02/16/2004

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