2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2008 08:00 A
Secretary of State

| | ANNUAL | REPORT | | wiar C | US, 2000 US: |
|--|--|---|-------------------------------|--|--|
| DOCUMENT # L03000011651 1. Entity Name HOMEBUYER'S MORTGAGE ASSOCIATION, L.L.C. | | | | S | ecretary of Sta |
| HOMER | JYER'S MORTGAGE ASSOCI | ATION, L.L.C. | | | |
| 23 FERNBRO | ce of Business OOKE DRIVE BOR, FL 34695 | Mailing Address 23 FERNBROOKE DRIVE SAFETY HARBOR, FL 34695 | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | |
| DO NOT WRITE IN THIS SPACE | | | CF | 02282008 No Chg-LLC | CR2E083 (12/07) |
| | | | | 4. FEI Number 84-1622436 5. Certificate of Status Desired | Applied For Not Applicable \$5.00 Additional Fee Required |
| | 6. Name and Address of Current Re | gistered Agent | | | |
| JOKEL, JAMES 23 FERNBROOKE DRIVE SAFETY·HARBOR, FL 34695 | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | |
| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | | | | | |
| 9. ~ | MANAGING MEMBERS | /MANAGERS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR JOKEL, JAMES 23 FERNBROOKE DRIVE SAFETY HARBOR, FL 34695 | | | | |
| NAME STREET ADDRESS CITY - ST-ZIP | | , | | U0000084 03/18/08-80 | 6909 0047-010 138.75 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 11. I hereby certify that the information susplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes. | | | | | |

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SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE: