

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

04-16-2004 90409 014 ****55.00

DOCUMENT # L03000012331							
1. Entity Name CAPITAL SOURCE MORTGAGE, LLC							
Principal Place of Business 11022 VIA SAN REMO BOYNTON BEACH, FL 33437		Mailing Address 11022 VIA SAN REMO BOYNTON BEACH, FL 33437					
2. Principal Place of Business 1001 YAMATO RD Suite, Apt. #, etc. 310		3. Mailing Address 1001 YAMATO RD Suite, Apt. #, etc. 310					
City & State BOCA RATON, FL Zip 33487 Country USA		City & State BOCA RATON, FL Zip 33487 Country USA					
4. FEI Number 56-2339614		Applied For ☐ Not Applicable					
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required		04132004 Chg-LLC CR2E083 (10/03)					
6. Name and Address of Current Registered Agent DODEK, ROBERT 11022 VIA SAN REMO BOYNTON BEACH, FL 33437		7. Name and Address of New Registered Agent Name: LEONARD MARSHALL Street Address (P.O. Box Number is Not Acceptable): 1001 YAMATO ROAD ST 310 City: BOCA RATON, FL Zip Code 33487					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>[Signature]</i> LEONARD MARSHALL DATE: 4/13/04 (NOTE: Registered Agent signature required when reinstating)							
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State					
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES					
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> TITLE: MEMBER NAME: Robert Dodek STREET ADDRESS: 11022 Via San Remo CITY-STATE-ZIP: Boynton Beach FL 33437 </td> <td style="width: 50%; text-align: right;"> ☐ Delete </td> </tr> </table>		TITLE: MEMBER NAME: Robert Dodek STREET ADDRESS: 11022 Via San Remo CITY-STATE-ZIP: Boynton Beach FL 33437	☐ Delete	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> TITLE: MEMBER NAME: LEONARD MARSHALL STREET ADDRESS: 1001 YAMATO ROAD CITY-STATE-ZIP: BOCA RATON, FL 33487 </td> <td style="width: 50%; text-align: right;"> ☐ Change ☒ Addition </td> </tr> </table>		TITLE: MEMBER NAME: LEONARD MARSHALL STREET ADDRESS: 1001 YAMATO ROAD CITY-STATE-ZIP: BOCA RATON, FL 33487	☐ Change ☒ Addition
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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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* LEONARD MARSHALL **DATE:** 4/13/04 **DAYTIME PHONE:** 201-241-0022

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE