

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000027966

**FILED**  
**Apr 13, 2004**  
**Secretary of State**

**Entity Name:** COMPLETE MORTGAGE COMPANY, "LLC"

**Current Principal Place of Business:**

176 EAST HIGHLAND AVENUE  
SUITE B  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 120752  
CLERMONT, FL 34712

**New Mailing Address:**

**FEI Number:** 05-0580246

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEATHERBEE, COLLEEN J  
10438 LAKE HILL DRIVE  
CLERMONT, FL 34711 US

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

WEATHERBEE, COLLEEN J  
PO BOX 120752  
CLERMONT, FL 34712 US

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:

04/13/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: WEATHERBEE, COLLEEN J  
Address: PO BOX 120752  
City-St-Zip: CLERMONT, FL 34712

**ADDITIONS/CHANGES:**

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: COLLEEN J WEATHERBEE

MGR

04/13/2004

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