

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000037288

1. Entity Name
CONNER MORTGAGE, LLC



Principal Place of Business
**2701 MAITLAND CENTER PARKWAY, SUITE 300
MAITLAND, FL 32751-7416**

Mailing Address
**2701 MAITLAND CENTER PARKWAY, SUITE 300
MAITLAND, FL 32751-7416**



01032005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
45-0526356

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HEEKIN, JAMES F JR
215 NORTH EOLA DRIVE
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
CONNER, ROGER W III
2701 MAITLAND CTR PKWY, STE 300
MAITLAND, FL 327517416**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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1100000184231
01/20/05-80022-014 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Roger W. Conner III

1-12-05

Date

407-659-2000

Daytime Phone #