

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039163

Entity Name: MASON MORTGAGE, LLC

FILED  
Apr 15, 2004  
Secretary of State

## Current Principal Place of Business:

2190 J & C BOULEVARD  
NAPLES, FL 34109

## New Principal Place of Business:

## Current Mailing Address:

9240 BONITA BEACH ROAD, SUITE 1117  
BONITA SPRINGS, FL 34135

## New Mailing Address:

FEI Number: 20-0257358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GEIDNER, BRIAN  
9240 BONITA BEACH ROAD, #1117  
BONITA SPRINGS, FL 34135 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: MGRM ( ) Delete  
Name: GEIDNER, BRIAN  
Address: 9240 BONITA BEACH ROAD, #1117  
City-St-Zip: NAPLES, FL 34109

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: MASON, MONICA L  
Address: 2190 J & C BOULEVARD  
City-St-Zip: NAPLES, FL 34109

Title: MGR ( ) Change (X) Addition  
Name: MASON, SANDRA J  
Address: 2190 J & C BOULEVARD  
City-St-Zip: NAPLES, FL 34109

Title: MGR ( ) Change (X) Addition  
Name: MULLERSMAN, STEVEN J  
Address: 2190 J & C BOULEVARD  
City-St-Zip: NAPLES, FL 34109

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: BRIAN M. GEIDNER

MGRM

04/15/2004

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