


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90254 034 \*\*\*\*55.00

DOCUMENT # L03000053623			
1. Entity Name EAGLE MORTGAGE FINANCIAL LLC.			
Principal Place of Business 11201 N.W. 33 STREET CORAL SPRINGS FL 33065		Mailing Address 11201 N.W. 33 STREET CORAL SPRINGS FL 33065	
2. Principal Place of Business - No P.O. Box # <i>11201 N.W. 33rd St</i>		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <i>Coral Springs, FL.</i>		City & State	
Zip <i>33065</i>		Country <i>Broward</i>	
4. FEI Number <b>83-0421683</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent  FRANCES, PHILPART 11201 N.W. 33 STREET CORAL SPRINGS FL 33065		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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		DATE	
<small>Signature, typed or printed name of registered agent and title if applicable.</small>		<small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$50.00</b>		<b>Make Check Payable to Florida Department of State</b>	
<b>Due By May 1, 2007</b>			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PHILPART, FRANCES 11201 N.W. 33 STREET CORAL SPRING FL 33065 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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1st MOORE CR2E083 (10/06)

SIGNATURE: *Frances Philpart*

*4-04-07*