

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003107

Entity Name: CITY MORTGAGE, L.L.C

FILED  
May 29, 2008  
Secretary of State

**Current Principal Place of Business:**

6065 NW 167 STREET, SUITE B12  
MIAMI, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

6065 NW 167 STREET, SUITE B12  
MIAMI, FL 33015

**New Mailing Address:**

FEI Number: 20-0594600      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LACOUTURE, DANIEL E  
6065 NW 167 ST. SUITE 1312  
MIAMI, FL 33015 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/MANAGERS:**

Title: MGR ( ) Delete  
Name: LACOUTURE, DANIEL  
Address: 6065 NW 167TH ST, SUITE B12  
City-St-Zip: MIAMI, FL 33015

Title: MGR ( ) Delete  
Name: OSORIO, ALBA L  
Address: 6065 NW 167TH ST, STE B12  
City-St-Zip: HIALEAH, FL 33015

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DANIEL LACOUTURE

PR

05/29/2008

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