

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003235

FILED  
Jan 31, 2006  
Secretary of State

Entity Name: EQUILLIANCE CLOSING SERVICES, LLC

## Current Principal Place of Business:

301 WEST S.R. 434, SUITE 309  
WINTER SPRINGS, FL 32708

## New Principal Place of Business:

3501 QUADRANGLE BLVD.  
100  
ORLANDO, FL 32817

## Current Mailing Address:

301 WEST S.R. 434, SUITE 309  
WINTER SPRINGS, FL 32708

## New Mailing Address:

3501 QUADRANGLE BLVD.  
100  
ORLANDO, FL 32817

FEI Number: 20-0593443

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAYS, WILLIAM  
301 WEST S.R. 434, SUITE 309  
WINTER SPRINGS, FL 32708 US

## Name and Address of New Registered Agent:

MAYS, WILLIAM  
3501 QUADRANGLE BLVD.  
100  
ORLANDO, FL 32817 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:

01/31/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MAYS, WILLIAM B  
Address: 2356 BUCKINGHAM RUN COURT  
City-St-Zip: ORLANDO, FL 32828

Title: MGRM ( ) Delete  
Name: MATITNGLY, TIMOTHY  
Address: 2948 FITZOOOTH DRIVE  
City-St-Zip: WINTER PARK, FL 32792

Title: MGRM ( ) Delete  
Name: VELA, JAMES E  
Address: 750 WOUTH EDGEMON AVE.  
City-St-Zip: WINTER SPRINGS, FL 32708

## ADDITIONS/CHANGES:

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

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 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: WILLIAM B. MAYS

PRES

01/31/2006

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