

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013162

FILED
Jun 02, 2006
Secretary of State

Entity Name: LIEN MANAGEMENT SERVICES LLC

Current Principal Place of Business:

1450 CENTREPARK BLVD STE 325
WEST PALM BEACH, FL 33401

New Principal Place of Business:

768 CYPRESS GREEN CIRCLE
WELLINGTON, FL 33414

Current Mailing Address:

1450 CENTREPARK BLVD STE 325
WEST PALM BEACH, FL 33401

New Mailing Address:

768 CYPRESS GREEN CIRCLE
WELLINGTON, FL 33414

FEI Number: 43-2004532 **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:

GREETHAM, DONALD
1450 CENTREPARK BLVD STE 325
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

GREETHAM, DONALD
768 CYPRESS GREEN CIRCLE
WELLINGTON, FL 33414 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:

06/02/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GREETHAM, DONALD E
Address: 1450 CENTREPARK BLVD STE 325
City-St-Zip: WEST PALM BEACH, FL 33401 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GREETHAM, DONALD E
Address: 768 CYPRESS GREEN CIRCLE
City-St-Zip: WELLINGTON, FL 33414 US

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: DONALD GREETHAM

MGR

06/02/2006

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