

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031226

FILED
Jul 10, 2006
Secretary of State

Entity Name: CORNERSTONE MORTGAGE SOLUTIONS, LLC

Current Principal Place of Business:

744 E BURGESS RD A101
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

744 E BURGESS RD A101
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 02-0721369 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:

JONES, STEPHEN M
6009 FOREST GREEN RD.
PENSACOLA, FL 32505 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: DICKSON, DAVID
Address: 9180 STILLBRIDGE LANE
City-St-Zip: PENSACOLA, FL 32514

Title: MGR () Delete
Name: JONES, STEPHEN M
Address: 6009 FOREST GREEN RD.
City-St-Zip: PENSACOLA, FL 32505

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DICKSON, DAVID
Address: 648 SHILOH DR
City-St-Zip: PENSACOLA, FL 32503

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: STEPHEN M JONES

MGR

07/10/2006

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