2006 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Feb 13, 2006 08:00 AM Secretary of State DOCUMENT # L04000057346 RENU MORTGAGE, LLC Principal Place of Business Mailing Address **625 EXECUTIVE DRIVE** PO BOX 440 WINTER PARK, FL 32789 WINTER PARK, FL 32790-0440 02102006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 34-2009720 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent TAYLOR, KYLE P DO NOT WRITE 2028 CHIPPEWA TRAIL MAITLAND, FL 32751 IN THIS SPACE 8. The above named entry 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGRM TITLE TAYLOR, KYLE P STREET ADDRESS 2026 CHIPPEWA TRAIL CITY-ST-71P MAITLAND, FL 32751 TITLE U00000432568 NAME 02/23/06-88973-010-50.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signisture 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 exemptions report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP