

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 16, 2006 8:00 am
Secretary of State

05-16-2006 90182 033 ****50.00

DOCUMENT # L04000057845

1. Entity Name
MARKETREND MORTGAGE NETWORK, LLC



Principal Place of Business
1357 58TH STREET NORTH
STE 147
CLEARWATER, FL 33760

Mailing Address
1357 58TH STREET NORTH
STE 147
CLEARWATER, FL 33760

20045718



2. Principal Place of Business
13575 58th ST. N.

3. Mailing Address

06302005 Chg-LLC CR2E083 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE. 147

City & State

City & State

CLEARWATER, FL

4. FEI Number

Applied For

20-1446664

Not Applicable

Zip
33760

Country

FLORIDA

Zip

Country

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRIS, CHARLES M JR
101 E. KENNEDY BOULEVARD STE. 2700
TAMPA, FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. 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 September 7, 2005

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
JONATHAN P. LAMMERS
3135 S. STATE ST, STE 103
ANN ARBOR, MI 48108

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
ROBERT K. O'MARA
13575 58th ST. N. STE 147
CLEARWATER, FL 33760

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
JEFFREY P. LAMMERS
13575 58th ST. N. STE 147
CLEARWATER, FL 33760

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

JEFFREY P. LAMMERS

9.6.05 727.538.7745

Date

Daytime Phone #