2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000069145

1. Entity Name
REO MANAGEMENT SERVICES, LLC

Principal Place of Business Mailing Address

13312 NORTH 56TH STREET TAMPA, FL 33617

SIGNATURE:

13312 NORTH 56TH STREET TAMPA, FL 33617 FILED Jan 31, 2007 08:00 AM Secretary of State



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
56-2482124		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTH

NEUKAMM, JOHN B 101 EAST KENNEDY BOULEVARD STE. 3140 TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

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 little it applicable	(NOTE Registered Agent signature required when reinstating)	DATE	
Fi	ling Fee is \$50.00 ue by May 1, 2007		H00000614056 02/06/07-80010-008 50.00	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SIMONE, JOHN V 13312 NORTH 56TH STREET TAMPA, FL 33617			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME SIREET ADDRESS CITY-SI-ZIP	e the programme of the first of the second o	DO	NOT WRITE	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby indicated	certify that the information supplied with this filling does not a on this report is true and accurate and that my signature st	quality for the exemptions contained in Chapter 119 half have the same legal effect as if made under oal	, Florida Statutes. I further certify that the information th; that I am a managing member or manager of the	