## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076321

Entity Name: MORTGAGE ASSISTANCE SOLUTIONS, LLC

**FILED** Feb 15, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

800 N.E. 195TH STREET, #302 537 DOUGLAS AVE N. MIAMI BEACH, FL 33179

#17

DUNEDIN, FL 34698

**Current Mailing Address: New Mailing Address:** 

800 N.E. 195TH STREET, #302 537 DOUGLAS AVE DUNEDIN, FL 34698 N. MIAMI BEACH, FL 33179

FEI Number: 20-1517185 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STOLLER, HAROLD MCDANIEL, CALEB 800 N.E. 195TH STREET, #302 1110 BLUFFS CIRCLE N. MIAMI BEACH, FL 33179 DUNEDIN, FL 34698 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: CALEB MCDANIEL 02/15/2005

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGR ( ) Delete Title: () Change () Addition

STOLLER, MICHAEL Name: Name: Address: 9454 WILSHIRE BLVD., SUTIE 500 Address: City-St-Zip: BEVERLY HILLS, CA 90212 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL STOLLER **PRES** 02/15/2005