## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000081229

City-St-Zip:

Entity Name: OCWEN FULFILLMENT OPERATIONS LLC

FILED May 01, 2006 Secretary of State

Current Pi	rincipal Place	of Business:	New Prince	cipal Place of Business:	
1661 WOR SUITE 100	RTHINGTON R	DAD			
WEST PALM BEACH, FL 33409					
Current Mailing Address:			New Mailing Address:		
SUITE 100	RTHINGTON RO , ATT: TERRI _M BEACH, FL	DENONCOURT			
In accordanc		FEI Number Applied For() FEI N (2)(b), F.S., the limited liability company di- urrent Registered Agent:			
1201 HAYS	ATION SERVIC S STREET SSEE, FL 3230				
	named entity s of Florida.	ubmits this statement for the purpose	of changing	its registered office or registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent				Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	OCWEN ASSET	Delete MANAGEME, NT CORP. GTON ROAD, SUITE 100 EACH, FL 33409	Title: Name: Address: City-St-Zip:	MGRM (X) Change () Addition OCWEN ASSET INVESTME, NT CORP. 1661 WORTHINGTON ROAD, SUITE 100 WEST PALM BEACH, FL 33409	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	MGR ( ) Change (X) Addition ERBEY, WILLIAM C 1661 WORTHINGTON ROAD, SUITE 100 WEST PALM BEACH, FL 33409	
Title: Name: Address:	( )	Delete	Title: Name: Address:	MGR ( ) Change (X) Addition FARIS, RONALD M 1661 WORTHINGTON ROAD, SUITE 100	

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.

City-St-Zip: WEST PALM BEACH, FL 33409

SIGNATURE: RONALD M. FARIS MGR 05/01/2006