

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088852

FILED  
Jan 30, 2007  
Secretary of State

**Entity Name:** ACE RESIDENTIAL MORTGAGE L.L.C.

**Current Principal Place of Business:**

4210 DEL PRADO BLVD S.  
CAPE CORAL, FL 33993

**New Principal Place of Business:**

**Current Mailing Address:**

4210 DEL PRADO BLVD S.  
CAPE CORAL, FL 33993

**New Mailing Address:**

**FEI Number:** 41-2019728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHIREMAN, RICHEL  
229 N.W. 10TH ST.  
CAPE CORAL, FL 33993 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SHIREMAN, BRETT  
Address: 229 N.W. 10TH ST  
City-St-Zip: CAPE CORAL, FL 33993

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SHIREMAN, RICHEL  
Address: 4210 DEL PRADO BLVD.  
City-St-Zip: CAPE CORAL, FL 33904

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.

SIGNATURE: RICHEL SHIREMAN

MGR

01/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date