

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019569

FILED
May 23, 2006
Secretary of State

Entity Name: SENTINEL CAPITAL MORTGAGE, LLC

Current Principal Place of Business:

1555 PALM BEACH LAKES
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

1555 PALM BEACH LAKES
1210
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

1555 PALM BEACH LAKES
WEST PALM BEACH, FL 33401 US

New Mailing Address:

1555 PALM BEACH LAKES
1210
WEST PALM BEACH, FL 33401 US

FEI Number: 43-2075788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KIJANKA, MICHAEL
7844 RED RIVER ROAD
WEST PALM BEACH, FL 33411 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: THE MACK CAPITAL GRO, UP, INC
Address: 7844 RED RIVER ROAD
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM () Delete
Name: BRATT SYSTEMS, INC,
Address: 1312 PARKWAY CT
City-St-Zip: WEST PALM BEACH, FL 33413 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LOUIS ORTIZ

MGRM

05/23/2006

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