

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037777

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** ACCESS MORTGAGE OF FLORIDA, LLC

**Current Principal Place of Business:**

5266 OFFICE PARK BLVD  
SUITE 204  
BRADENTON, FL 34203 US

**New Principal Place of Business:**

5 CR 7010  
WYNNE, AR 72396 US

**Current Mailing Address:**

5266 OFFICE PARK BLVD  
SUITE 204  
BRADENTON, FL 34203 US

**New Mailing Address:**

5 CR 7010  
WYNNE, AR 72396 US

**FEI Number:** 20-2694701 **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:**

OBRIEN, PATRICIA K  
5266 OFFICE PARK BLVD  
SUITE 204  
BRADENTON, FL 34203 US

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

OBRIEN, PATRICIA K  
5 CR 7010  
WYNNE, FL 72396 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:

05/01/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: OBRIEN, PATRICIA K  
Address: 5266 OFFICE PARK BLVD SUITE 204  
City-St-Zip: BRADENTON, FL 34203 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: OBRIEN, PATRICIA K  
Address: 5 CR 7010  
City-St-Zip: WYNNE, AR 72396 US

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA K. OBRIEN

MGR

05/01/2008

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