2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L05000040920

Entity Name: NLS MORTGAGE SERVICES, LLC.

Current Principal Place of Business:

601 N. CONGRESS AVE, SUITE 429
DELRAY BEACH, FL 33445

New Principal Place of Business:

9899 KAMENA CIRCLE #18
BOYNTON BEACH, FL 33436

Current Mailing Address:

601 N. CONGRESS AVE, SUITE 429
DELRAY BEACH, FL 33445

New Mailing Address:

9899 KAMENA CIRCLE #18
BOYNTON BEACH, FL 33436

FEI Number: 20-2769151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHERRY, NEIL L
9899 KAMENA CIRCLE
BOYNTON BEACH, FL 33436 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: MGR ( ) Delete
Name: SHERRY, NEIL L
Address: 2240 WOOLBRIGHT ROAD, SUITE 407
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: SHERRY, NEIL L
Address: 9899 KAMENA CIRCLE #18
City-St-Zip: BOYNTON BEACH, FL 33436

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: NEIL SHERRY PRES 04/29/2009

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