


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 19, 2006 8:00 am
Secretary of State

06-19-2006 90368 033 ****50.00

DOCUMENT # L05000102682	
1. Entity Name HEART OF FLORIDA MORTGAGE SERVICE, LLC	

Principal Place of Business 8915 SW 92ND LANE GAINESVILLE, FL 32608	Mailing Address 8915 SW 92ND LANE GAINESVILLE, FL 32608
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20047408



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04072006 Chg-LLC CR2E083 (11/05)

4. FEI Number 56-2552564	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent PUGH, ERIC M 8915 SW 92ND LANE GAINESVILLE, FL 32608		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Eric M Pugh* DATE 5/27/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PUGH, ERIC M 8915 SW 92ND LANE GAINESVILLE, FL 32608 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Eric M Pugh* **5/27/06** **352-317-5626**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT

5-27-06

Divisions of Corporations
PO Box 6478
Tallahassee Florida 32314

Heart of Florida Mortgage Service, LLC
8915 SW 92 Lane
Gainesville Florida 32608

20047408
#LQ5000102682

RE: 2006 Limited Liability Company Annual Report/Heart of Florida Mortgage Service

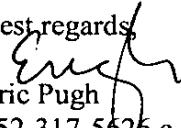
To whom it may concern,

I did not get in the mail the card that lets you know it is time to update your company's annual report. I am inquiring about Heart of Florida Mortgage Service, 56-2552564.

Enclosed is my \$50 filing fee. Do I owe any late fee or penalty?

Thank you in advance!

Best regards,


Eric Pugh

352-317-5626 c

epugh@crowdfinancialmortgage.com