

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043494

FILED
Mar 02, 2007
Secretary of State

Entity Name: UNITED MORTGAGE ALLIANCE LLC

Current Principal Place of Business:

5816 S SEMORAN BLVD
ORLANDO, FL 32822 US

New Principal Place of Business:

301 E PINE ST
SUITE 150
ORLANDO, FL 32801 US

Current Mailing Address:

5816 S SEMORAN BLVD
ORLANDO, FL 32822 US

New Mailing Address:

301 E PINE ST
SUITE 150
ORLANDO, FL 32801 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, JOSHUA A
5816 S SEMORAN BLVD
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

HARRIS, JOSHUA A
301 E PINE ST
SUITE 150
ORLANDO, FL 32801 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: JOSHUA A HARRIS

03/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARRIS, JOSHUA A
Address: 105 MARATHON LANE
City-St-Zip: SANFORD, FL 32771 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARRIS, JOSHUA A
Address: 105 MARATHON LANE
City-St-Zip: SANFORD, FL 32771 US

Title: MGR () Change (X) Addition
Name: JOSEPH, MARTIN
Address: 99 HAZELWOOD DR
City-St-Zip: JERICHO, NY 11753 US

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: JOSHUA A HARRIS

MGR

03/02/2007

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