

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081409

FILED
Jul 05, 2007
Secretary of State

Entity Name: COMPLETE MORTGAGE SOLUTIONS, LLC

Current Principal Place of Business:

101 NE 2ND STREET
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

101 NE 2ND STREET
OCALA, FL 34470

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: TAYLOR, BEAN & WHITA, KER MORTGAGE C O RP.
Address: 101 NE 2ND STREET
City-St-Zip: OCALA, FL 34470

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

Title: MGR (X) Delete
Name: MICHAEL MOORE, JASON
Address: 1140 SE FORT KING STREET
City-St-Zip: OCALA, FL 34471

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

Title: MGR (X) Delete
Name: NICHOLAS GREEN, DARREN
Address: 680 SE 8TH STREET
City-St-Zip: OCALA, FL 34471

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

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: LEE FARKAS

PRES

07/05/2007

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