

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081409

FILED
Feb 14, 2008
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:

315 NE 14TH STREET
OCALA, FL 34470

Current Mailing Address:

101 NE 2ND STREET
OCALA, FL 34470

New Mailing Address:

315 NE 14TH STREET
OCALA, FL 34470

FEI Number: 20-5415225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: TAYLOR, BEAN & WHITA, KER MORTGAGE C O RP.
Address: 101 NE 2ND STREET
City-St-Zip: Ocala, FL 34470

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TAYLOR, BEAN & WHITA, KER MORTGAGE C O RP.
Address: 315 NE 14TH STREET
City-St-Zip: Ocala, FL 34470

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: TAYLOR, BEAN & WHITAKER MORTGAGE CORP.

MGR

02/14/2008

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