2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 24, 2007
Secretary of State

DOCUMENT# L06000101179

Entity Name: SUNSHINE STATE MORTGAGE SOLUTIONS LLC

Current Principal Place of Business:

7050 SUNSET DRIVE S.
1006
SOUTH PASADENA, FL 33707

New Principal Place of Business:

1135 PASADENA AVE. S
327G
SOUTH PASADENA, FL 33707 PI

Current Mailing Address:

7050 SUNSET DRIVE S.
1006
SOUTH PASADENA, FL 33707

New Mailing Address:

1135 PASADENA AVE. S.
327G
SOUTH PASADENA, FL 33707

FEI Number: 87-0784712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

ST.CLAIR, MARK D
7050 SUNSET DRIVE S.
1006
SOUTH PASADENA, FL 33707 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: ST.CLAIR, MARK D
Address: 7050 SUNSET DRIVE S # 1006
City-St-Zip: SOUTH PASADENA, FL 33707

Title: MGR ( ) Delete
Name: ST.CLAIR, POONSRI
Address: 7050 SUNSET DRIVE S. #1006
City-St-Zip: SOUTH PASADENA, FL 33707

ADDITIONS/CHANGES:

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

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: MARK ST.CLAIR MM 08/24/2007

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