2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2007
Secretary of State

DOCUMENT# L06000120076

Entity Name: ALPHA & OMEGA MORTGAGE, LLC

Current Principal Place of Business:

1919 N STATE RD 7
205
MARGATE, FL 33068

New Principal Place of Business:

1919 N STATE RD 7
206
MARGATE, FL 33068

Current Mailing Address:

1919 N STATE RD 7
204
MARGATE, FL 33063

New Mailing Address:

1919 N STATE RD 7
207
MARGATE, FL 33063

FEI Number: 45-0547829 **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:

TRACEY, JASON
1919 N STATE RD 7
205
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

TRACEY, JASON
1919 N STATE RD 7
207
MARGATE, FL 33063 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: GISANE TILLMAN 07/05/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: TILLMAN, GISANE
Address: 1919 N STATE RD 7 ST. 204
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: TILLMAN, GISANE
Address: 1919 N STATE RD 7 ST. 206
City-St-Zip: MARGATE, FL 33063

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: GISANE TILLMAN MGRM 07/05/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date