

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000010520

Entity Name: HOME MORTGAGE CAPITAL LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

2121 KILLEAREY WAY
STE A
TALLAHASSEE, FL 32309

Current Mailing Address:

2121 KILLEAREY WAY
STE A
TALLAHASSEE, FL 32309

New Principal Place of Business:

4697 N MONROE ST
STE A
TALLAHASSEE, FL 32303

New Mailing Address:

4697 N MONROE ST
STE A
TALLAHASSEE, FL 32303

FEI Number: 26-1193514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUDD, R L
2121 KILLEAREY WAY
STE A
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

RUDD, R L
4697 N MONROE ST
STE A
TALLAHASSEE, FL 32303 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: R L RUDD

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TYRE, CURTIS L
Address: 2121 KILLEAREY WAY STE A
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM () Delete
Name: RUDD, R L
Address: 2121 KILLEAREY WAY STE A
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TYRE, CURTIS L
Address: 4697 N MONROE ST
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM (X) Change () Addition
Name: RUDD, R L
Address: 4697 N MONROE ST
City-St-Zip: TALLAHASSEE, FL 32309

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: R L RUDD

MGRM

04/30/2009

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