## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000087832

Entity Name: UNITED FORECLOSURE NETWORKS, LLC

FILED Mar 24, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5001 N. UNIVERSITY DR. 9021 TAFT STREET

SUITE J PEMBROKE PINES, FL 33024 US DAVIE, FL 33328 US

Current Mailing Address: New Mailing Address:

5001 N. UNIVERSITY DR. 9021 TAFT STREET

SUITE J PEMBROKE PINES, FL 33024 US

DAVIE, FL 33328 US

FEI Number: 26-0788870 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CNI,LLC 8362 PINES BLVD. 138

PEMBROKE PINES, FL 33024 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 Title: ( ) Change ( ) Addition

 Name:
 CNI,LLC,
 Name:

 Address:
 8362 PINES BLVD SUITE 138
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition Name: QUALITY CARE MORTGAG, E INC. Name: QUALITY CARE MORTGAG, E INC.

Address: 5001 N. UNIVERSITY DR. SUITE J Address: 9021 TAFT STREET

City-St-Zip: DAVIE, FL 33328 City-St-Zip: PEMBROKE PINES, FL 33024

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: CHRISTOPHER NUNEZ MGR 03/24/2008