

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000020095

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** ATLANTIC MORTGAGE PARTNERS, LLC

**Current Principal Place of Business:**

433 PLAZA REAL STE 275  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

4880 BOCAIRE BLVD  
BOCA RATON, FL 33487

**New Mailing Address:**

**FEI Number:** 80-0337694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATTEO, MAXINE L  
4880 BOCAIRE BLVD  
BOCA RATON, FL 33487 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:** MGRM  
**Name:** MATTEO, MAXINE L  
**Address:** 4880 BOCAIRE BLVD  
**City-St-Zip:** BOCA RATON, FL 33487

**Title:** MGRM  
**Name:** MATTEO, JOSEPH M  
**Address:** 4880 BOCAIRE BLVD  
**City-St-Zip:** BOCA RATON, FL 33487

**Title:** MGRM  
**Name:** INTERLANDI, STACEY  
**Address:** 7177 BRICKYARD CIRCLE  
**City-St-Zip:** LAKE WORTH, FL 33467

I hereby 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:** MAXINE L MATTEO

MMP

01/05/2010

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