

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jul 20, 2009  
Secretary of State**

DOCUMENT# L08000033613

Entity Name: CENTURY HOME MORTGAGE, LLC

**Current Principal Place of Business:**

14 LEE DRIVE  
ST AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

4425 US 1 SOUTH  
#309  
ST AUGUSTINE, FL 32086 US

**Current Mailing Address:**

14 LEE DRIVE  
ST AUGUSTINE, FL 32080 US

**New Mailing Address:**

4425 US 1 SOUTH  
#309  
ST AUGUSTINE, FL 32086 US

FEI Number: 26-2320521      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:**

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

WILSON, PHILLIP  
14 LEE DRIVE  
ST AUGUSTINE, FL 32080 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: MGRM ( ) Delete  
Name: WILSON, PHILLIP  
Address: 14 LEE DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32080 US

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: PHILLIP G WILSON

MGRM

07/20/2009

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