

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000002028

Entity Name: MC SERVICING LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8004 ACORN RIDGE RD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

888 SUEMAC ROAD  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

8004 ACORN RIDGE RD  
JACKSONVILLE, FL 32256

**New Mailing Address:**

888 SUEMAC ROAD  
JACKSONVILLE, FL 32254

FEI Number: 26-3983291

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STOFFLET, KELLY L  
9995 GATE PARKWAY N  
SUITE 400  
JACKSONVILLE, FL 32246 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: BOREE, MELANIE M  
Address: 888 SUEMAC ROAD  
City-St-Zip: JACKSONVILLE, FL 32254

Title: MGR  
Name: SULLIVAN, CHARLENE  
Address: 888 SUEMAC ROAD  
City-St-Zip: JACKSONVILLE, FL 32254

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: CHARLENE J. SULLIVAN

PART

01/04/2012

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