

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000061802

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** REVERSE MORTGAGE REPOSITORY, LLC

**Current Principal Place of Business:**

411B 3RD AVENUE SOUTH  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

3787 PALM VALLEY ROAD  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

411B 3RD AVENUE SOUTH  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

3787 PALM VALLEY ROAD  
PONTE VEDRA BEACH, FL 32082

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MCCONNELL, DAVID L III  
411B 3RD AVENUE SOUTH  
JACKSONVILLE BEACH, FL 32250 US

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

SUMMERS, VAN E  
3787 PALM VALLEY ROAD  
PONTE VEDRA BEACH, FL 32082 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: VAN E. SUMMERS

03/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: SUMMERRS, VAN E  
Address: 3787 PALM VALLEY RD.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: VAN E. SUMMERS

PRES

03/20/2012

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