

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000068100

**FILED**  
**Mar 26, 2012**  
**Secretary of State**

**Entity Name:** SHORT SALE PROCESSING, LLC

**Current Principal Place of Business:**

810 POINSETTA DRIVE  
#7  
INDIAN HARBOUR BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

810 POINSETTA DRIVE  
#7  
INDIAN HARBOUR BEACH, FL 32937

**New Mailing Address:**

810 POINSETTA DRIVE  
#7  
INDIAN HARBOUR BEACH, FL 32937 US

**FEI Number:** 45-2734711

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLIER, RICHARD T  
810 POINSETTA DRIVE  
#7  
INDIAN HARBOUR BEACH, FL 32937 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:** MGMR  
**Name:** COLLIER, RICHARD T  
**Address:** 810 POINSETTA DRIVE #7  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937

**Title:** MGMR  
**Name:** COLLIER, KIMBERLY A  
**Address:** 810 POINSETTA DRIVE #7  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937

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:** KIMBERLY A. COLLIER

MGMR

03/26/2012

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