

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000698

Entity Name: NATIONSTAR MORTGAGE LLC

FILED
Apr 19, 2007
Secretary of State

Current Principal Place of Business:

350 HIGHLAND DRIVE
LEWISVILLE, TX 75067

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 199000
DALLAS, TX 75219

New Mailing Address:

350 HIGHLAND DRIVE
LEWISVILLE, TX 75067

FEI Number: 75-2921540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGR () Delete
Name: BARONE, ANTHONY H MANAGER
Address: 2728 N. HARWOOD ST.
City-St-Zip: DALLAS, TX 75201

Title: MGR (X) Delete
Name: ECHOLS, LEDDON E MANAGER
Address: 2728 N. HARWOOD ST.
City-St-Zip: DALLAS, TX 75201

Title: MGR (X) Delete
Name: MINTZ, JORDAN H
Address: 2728 N. HARWOOD ST.
City-St-Zip: DALLAS, TX 75201

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARONE, ANTHONY H MANAGER
Address: 350 HIGHLAND DRIVE
City-St-Zip: LEWISVILLE, TX 75067

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY BARONE

MGR

04/19/2007

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