2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M02000000621

52 EUCLID STREET

WOODBURY NJ 08096



05-29-2003 90028 003 ****50.00

FILED

May 29, 2003 8:00 am Secretary of State

FOUNDERS MORTGAGE USA, LLC								

Principal Place of Business Mailing Address

2. Principal Place of Business 3. Mailing Address

52 EUCLID STREET WOODBURY NJ 08096

DOOL MOOD	BURY GLASSBURD ROAD	660 WOODBURY GLAS	SSBORO	KOAD					
Suite, Apt.					☐ CHECK HERE IF MAKING CHANGES				
City & Stat	te	City & State			4. FEI Num	ber		A	pplied For
SEWI	ELL, NEW JERSEY	SEWELL, NEW	JERSE	Y	03-0	396322		N	lot Applicable
Zip Country USA		Zip 08080	Country US		5. Certifica	te of Status Desired		\$5.00 Ad Fee Require	
	6. Name and Address of Current I	Registered Agent			7Name ar	d Address of New Ri	egistered A	gent	
				Name					
SINGER, DAVID ESQ. 13320 SOUTHWEST 128TH STREET MIAMI FL 33186				Street Ad					
(3	05)253 8503		•	City	*		FL	Zip Coc	ie
R The above	named entity submits this statement for	the nurrose of changing ite	registered	office or	registered agent, or h	oth, in the State of Flor	ida I am fa	 miliar with	and accent
	tions of registered agent.	the purpose of changing its	registered	Onice of	registered agent, or b	our, in the state or hor	iug. Fairie	urmica vyidi,	and accept
ŭ					•				
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if annlicable (NOTE	· Registered A	gent signatur	re required when reinstating)		DATE		
	Signature, typed or printed name or registered agent a	rio tite ii applicacie. (14012	. negistereo A	yerii siyriatui	e reduited when remorating)		DOLL		
		FILE NO Make Check Payable Due		ida Dep	artment of State	4.			
9.	MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/	CHANGES		
TITLE -	MGRM	□ Delete	TITLE					K Change	☐ Addition
NAME	SMITH, FRANK B	Delete	NAME	1					
STREET ADDRESS	52 EUCLID STREET			AODRES\$	660 WOODBUR	Y GLASSBORO	RUAD		
CITY-ST-ZIP	1	,	CITY-ST		SEWELL, NJ	08080	KOAD		
	WOODBURY NJ 08096	-71	-		SEWELL, NJ	00000			
TITLE	MGRM	Delete	TITLE					Change	Addition
NAME	LANG, MICHAEL		NAME						
STREET ADDRESS	52 EUCLID STREET			ADDRESS					
CITY-ST-ZIP	WOODBURY NJ 08096		_ CITY-ST	r-ZIP	-	i_			
TITLE	MGRM	☐ Delete	TITLE					X Change	Addition
NAME	PIOTROWSKI, BRIAN		NAME						
STREET ADDRESS	52 EUCLID STREET	,	STREET	ADDRESS	660 WOODBUR	Y GLASSBORO	ROAD		
CITY-ST-ZIP	WOODBURY NJ 08096		CITY-ST	r-ZIP	SEWELL, NJ	08080			
TITLE		☐ Delete	TITLE		MGRM			☐ Change	X Addition
NAME			NAME		GERALD D. C	ORKERY		_ •	
STREET ADDRESS			STREET		2425 MARYLA				
CITY-ST-ZIP			CITY-ST	710		ND ROAD E. PA 19090	1		
TIT! C		□ Dalate	TITLE		MITTON AKON	FA 19090	·	☐ Change	Addition
TITLE NAME		☐ Delete		-				☐ Onlange	
STREET ADDRESS			NAME STREET	ADDRESS					
CITY-ST-ZIP			CITY-ST	ľ					
0117-01-215	· · · · · · · · · · · · · · · · · · ·		_	- L(F					
TITLE	1	☐ Delete	TITLE					☐ Change	☐ Addition
NAME			NAME						•
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP			CITY-ST	-ZIP					
11. Lhereby o	certify that the information supplied with	this filing does not qualify for	the exemp	ntion state	ed in Section 119.07(3	(Vi), Florida Statutes, L	further certi	ify that the	nformation

indicated on this report is true and accurate and that my 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 trostee empawered pexecute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: