2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 04, 2007
Secretary of State

DOCUMENT# M02000000656

Entity Name: HOMELINK MORTGAGE LLC

Current Principal Place of Business:

FOOT OF BROAD STREET
STRATFORD, CT 06615

New Principal Place of Business:

Current Mailing Address:

FOOT OF BROAD STREET
STRATFORD, CT 06615

New Mailing Address:

FEI Number: 73-1625129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

INCORPORATING SERVICES, LTD
1540 GLENWAY DRIVE
TALLAHASSEE, FL 32301 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:	MILLROD, HARMON	
Address:	9 MAGNOLIA DRIVE	
City-St-Zip:	RYE BROOK, NY 10573	
Title:	MGR	( ) Delete
Name:	PAUPECK, ALAN	
Address:	60 SAGINAW TRAIL	
City-St-Zip:	SHELTON, CT 06484	
Title:	MGR	( ) Delete
Name:	SHERMAN, ELIZABETH	
Address:	3529 LAWRENCE AVENUE	
City-St-Zip:	OCEANSIDE, NY 11572	
Title:	MGR	( ) Delete
Name:	HAFFNER, SUSANNE	
Address:	18 CLIPPER DRIVE	
City-St-Zip:	NORTHPORT, NY 11768	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: ALAN PAUPECK MGR 09/04/2007

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