

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001448

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: PASEOS MORTGAGE, LLC

**Current Principal Place of Business:**

245 RIVERSIDE AVENUE, SUITE 500  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

245 RIVERSIDE AVENUE, SUITE 500  
ATTN. LEGAL DEPT.  
JACKSONVILLE, FL 32202

**New Mailing Address:**

245 RIVERSIDE AVENUE, SUITE 500  
ATTN. LEGAL DEPT.-SUSAN WHITLATCH  
JACKSONVILLE, FL 32202

FEI Number: 01-0709618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARX, CHRISTINE M  
245 RIVERSIDE AVENUE, SUITE 500  
JACKSONVILLE, FL 32202 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: MGRM ( ) Delete  
Name: PASEOS,LLC,  
Address: 245 RIVERSIDE AVENUE, SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: MEMB ( ) Delete  
Name: THE ST. JOE COMPANY,  
Address: 245 RIVERSIDE AVENUE, SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: EC-P (X) Change ( ) Addition  
Name: CASSALA, NICK  
Address: 12724 GRAN BAY PKWY SUITE 150  
City-St-Zip: JACKSONVILLE, FL 32258

Title: EC-V ( ) Change (X) Addition  
Name: LASSMAN, MARK D  
Address: 7900 GLADES ROAD SUITE 200  
City-St-Zip: BOCA RATON, FL 33434

Title: EC-V ( ) Change (X) Addition  
Name: WRENN, LISA  
Address: 1137 MARBELLA PLAZA DRIVE  
City-St-Zip: TAMPA, FL 33619

Title: EC-V ( ) Change (X) Addition  
Name: WHYTE, DON  
Address: 1137 MARBELLA PLAZA DRIVE  
City-St-Zip: TAMPA, FL 33619

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: CHRISTINE M. MARX, AS SECRETARY

MGRM

04/24/2007

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