2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2004
Secretary of State

DOCUMENT# M02000002162

Entity Name: AMERICAN MORTGAGE SOURCE, L.L.C.

Current Principal Place of Business:

10 MECHANIC ST., STE. 160
RED BANK, NJ 07701

New Principal Place of Business:

10 MECHANIC STREET
SUITE 160
RED BANK, NJ 07701

Current Mailing Address:

10 MECHANIC ST., STE. 160
RED BANK, NJ 07701

New Mailing Address:

10 MECHANIC STREET
SUITE 160
RED BANK, NJ 07701

FEI Number: 01-0637584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/MEMBERS:

Title: P ( ) Delete
Name: LENSHOLD, PAUL
Address: 10 MECHANIC ST STE 160
City-St-Zip: RED BANK, NJ 07701

Title: P ( ) Delete
Name: GALLAHAN, DAVID
Address: 10 MECHANIC ST STE 160
City-St-Zip: RED BANK, NJ 07701

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LENSKOLD, PAUL
Address: 10 MECHANIC ST STE 160
City-St-Zip: RED BANK, NJ 07701

Title: MGR (X) Change ( ) Addition
Name: CALLAHAN, DAVID
Address: 10 MECHANIC ST STE 160
City-St-Zip: RED BANK, NJ 07701

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL LENSKOLD MGR 01/12/2004

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