

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000631

FILED  
Jan 16, 2007  
Secretary of State

**Entity Name:** MORTGAGE EQUITY LENDERS, LLC

**Current Principal Place of Business:**

20 PLEASANT RIDGE DRIVE, STE. B  
OWINGS MILLS, MD 21117

**New Principal Place of Business:**

**Current Mailing Address:**

20 PLEASANT RIDGE DRIVE, STE. B  
OWINGS MILLS, MD 21117

**New Mailing Address:**

**FEI Number:** 52-2095120

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, ALFREDO  
15116 SPRINGVIEW STREET  
TAMPA, FL 33624 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: LEPPERT, CHRISTOPHER A  
Address: 20 PLEASANT RIDGE DRIVE, STE. B  
City-St-Zip: OWINGS MILLS, MD 21117

Title: MGR ( ) Delete  
Name: YOUNG, SARAH  
Address: 10347 CROSS CREEK BOULEVARD #B  
City-St-Zip: TAMPA, FL 33647

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: YOUNG, SARAH  
Address: 10329 CROSS CREEK BOULEVARD #J  
City-St-Zip: TAMPA, FL 33647

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:** CHRISTOPHER A. LEPPERT

MGRM

01/16/2007

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