

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M03000000711

**FILED**  
**Aug 13, 2004**  
**Secretary of State**

**Entity Name:** THE JOHNNALAN GROUP, MORTGAGE ASSOCIATES LLC

**Current Principal Place of Business:**

10132 RENISTON DRIVE  
CHARLOTTE, NC 28210

**New Principal Place of Business:**

1604 CHURCHILL DOWNS DRIVE  
WAXHAW, NC 28173

**Current Mailing Address:**

10132 RENISTON DRIVE  
CHARLOTTE, NC 28210

**New Mailing Address:**

1604 CHURCHILL DOWNS DRIVE  
WAXHAW, NC 28173

**FEI Number:** 56-2175434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
526 E. PARK AVENUE  
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/MEMBERS:**

Title: MGR ( ) Delete  
Name: SACKS, ALAN  
Address: 10132 RENISTON DRIVE  
City-St-Zip: CHARLOTTE, NC 28210

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SACKS, ALAN  
Address: 1604 CHURCHILL DOWNS DRIVE  
City-St-Zip: WAXHAW, NC 28173

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: ALAN SACKS

MGRM

08/13/2004

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