2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001166

Entity Name: ASSET DIRECT MORTGAGE, LLC

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1351 DIVIDEND DRIVE 1090 NORTHCHASE PKWY

SUITE K SUITE 350

MARIETTA, GA 30067 MARIETTA, GA 30067

New Mailing Address: Current Mailing Address:

% CORPORATION SERVICE COMPANY 1090 NORTHCHASE PKWY 2711 CENTERVILLE RD., SUITE 400 SUITE 350

WILMINGTON, DE 19808 MARIETTA, GA 30067

FEI Number: 71-0923018 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: () Delete (X) Change () Addition

HANNA, DARRELL T Name: RELL PAULH Name: 11808 MIRACLE HILLS DR., MS W11-LEGAL Address: 11808 MIRACLE HILLS DR. Address:

City-St-Zip: OMAHA, NE 68154 City-St-Zip: OMAHA, NE 68154

Title: MGR Title: MGR (X) Change () Addition () Delete BERGER, NANCEE R Name: BERGER, NANCEE R Name:

Address: 11808 MIRACLE HILLS DR., MS W11-LEGAL Address: 11808 MIRACLE HILLS DR. City-St-Zip: OMAHA, NE 68154 City-St-Zip: OMAHA, NE 68154

Title: MGR () Delete Title: MGR (X) Change () Addition

BELL, PAUL H MAZOUR, MICHAEL E Name: Name: 11808 MIRACLE HILLS DR. Address: 11808 MIRACLE HILLS DR., MS W11-LEGAL Address:

City-St-Zip: OMAHA, NE 68154 City-St-Zip: OMAHA, NE 68154

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: MENDLIK, PAUL M Name: MENDLIK, PAUL M 11808 MIRACLE HILLS DR., MS W11-LEGAL Address: Address: 11808 MIRACLE HILLS DR.

City-St-Zip: OMAHA, NE 68154 City-St-Zip: OMAHA, NE 68154

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: PAUL M MENDLIK 04/27/2007