

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001697

FILED
May 02, 2006
Secretary of State

Entity Name: ABSOLUTE MORTGAGE SOLUTIONS, LLC

Current Principal Place of Business:

111 FOUNDERS PLACE
19TH FLOOR
EAST HARTFORD, CT 061083212

New Principal Place of Business:

111 FOUNDERS PLAZA
19TH FLOOR
EAST HARTFORD, CT 061083212

Current Mailing Address:

111 FOUNDERS PLACE
19TH FLOOR
EAST HARTFORD, CT 061083212

New Mailing Address:

111 FOUNDERS PLAZA
19TH FLOOR
EAST HARTFORD, CT 061083212

FEI Number: 06-1584620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: DEPASE, ALEXANDRO C
Address: 990 SILAS DEANE HIGHWAY
City-St-Zip: WETHERSFIELD, CT 06109

Title: MGRM () Delete
Name: SCHULMAN, MARC B
Address: 990 SILAS DEANE HIGHWAY
City-St-Zip: WETHERSFIELD, CT 06109

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DEPASE, ALEXANDRO C
Address: 111 FOUNDERS PLAZA, 19TH FLOOR
City-St-Zip: EAST HARTFORD, CT 06108

Title: MGRM (X) Change () Addition
Name: SCHULMAN, MARC B
Address: 111 FOUNDERS PLAZA, 19TH FLOOR
City-St-Zip: EAST HARTFORD, CT 06108

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: ALEXANDRO C. DEPASE

MGRM

05/02/2006

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