

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-10-2006 90042 005 ****50.00

DOCUMENT # M03000004122

1. Entity Name

RESIDENTIAL HOME LOAN CENTERS, LLC



Principal Place of Business

1777 REISTERSTOWN RD, STE 352 EAST
BALTIMORE, MD 21208

Mailing Address

1777 REISTERSTOWN RD, STE 352 EAST
BALTIMORE, MD 21208

DO NOT WRITE IN THIS SPACE



01102006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

52-2292310

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**Filing Fee is \$50.00
Due by May 1, 2008**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGDM MANAGER
NAME	FLECHNER, JACK ESQ
STREET ADDRESS	1777 REISTERSTOWN RD, STE 352 EAST
CITY-ST-ZIP	BALTIMORE, MD 21208
TITLE	MANAGER
NAME	LOUIS GELLER
STREET ADDRESS	1777 REISTERSTOWN RD STE 352 EAST
CITY-ST-ZIP	BALTIMORE, MD 21208
TITLE	MANAGER
NAME	GREGORY M FEIT
STREET ADDRESS	1777 REISTERSTOWN RD STE 352 EAST
CITY-ST-ZIP	BALTIMORE, MD 21208
TITLE	MANAGER
NAME	RAYMOND H STARKES, III
STREET ADDRESS	1777 REISTERSTOWN RD STE 352 EAST
CITY-ST-ZIP	BALTIMORE, MD 21208
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

[Signature] LOUIS GELLER

4/5/06 410.580.1999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #



ATTACHMENT
30005769
RESIDENTIAL HOME LOAN CENTERS
AMERICA'S LENDING TEAM
Making Dreams Happen, One Loan at a Time

April 20, 2006

Florida Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

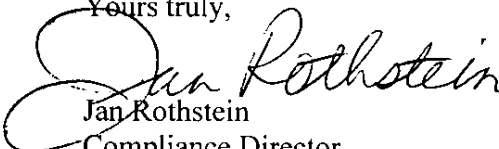
Re: M03000004122

To Whom It May Concern:

Enclosed is the 2006 Limited Liability Company Annual Report with the corrections, as per your letter to Residential Home Loan Centers, LLC.

If you have any questions, please call me at 800-232-7789 Ext # 19. Thank you.

Yours truly,


Jan Rothstein
Compliance Director



ATTACHMENT

30005769

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 12, 2006

RESIDENTIAL HOME LOAN CENTERS, LLC
1777 REISTERSTOWN RD, STE 352 EAST
BALTIMORE, MD 21208

Subject: **RESIDENTIAL HOME LOAN CENTERS, LLC**

Reference Number:

M03000004122

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Provide the title(s) of each manager, managing member or principal listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/MS

ANNUAL REPORTS SECTION