


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 03, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M04000001871</b> 1. Entity Name <b>GRAND PEAKS MORTGAGE AND FINANCIAL SERVICES, L.L.C.</b>	
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Principal Place of Business <b>7069 HIGHLAND DR STE. 250 SALT LAKE CITY, UT 84121</b>	Mailing Address <b>7069 HIGHLAND DR STE. 250 SALT LAKE CITY, UT 84121</b>
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**DO NOT WRITE IN THIS SPACE**



01192005No Chg-LLC

CR2E083 (10/03)

4. FEI Number <b>87-0659231</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.  
526 E. PARK AVENUE  
TALLAHASSEE, FL 32301**

**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 reinstalling) DATE

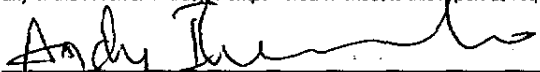
**Filing Fee is \$50.00  
Due by May 1, 2005**

000000213305  
02/03/05-80062-023 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM IHEANACHO, ANDY 7069 HIGHLAND DR STE. 250 SALT LAKE CITY, UT 84121</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM WALDIE, GREG 7069 HIGHLAND DR STE. 250 SALT LAKE CITY, UT 84121</b>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify 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 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #