

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003489

FILED
Apr 23, 2007
Secretary of State

Entity Name: GULF COAST MORTGAGE GROUP, LLC

Current Principal Place of Business:

126 COVE AVE., SUITE 1
GULF SHORES, AL 36542

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4345
GULF SHORES, AL 36547

New Mailing Address:

FEI Number: 30-0221867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA COMPLIANCE SPECIALISTS, INC.
2331 HANSEN PLACE
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/MANAGERS:

Title: MGRM () Delete
Name: LYNN, RON
Address: 126 COVE AVE., SUITE 1
City-St-Zip: GULF SHORES, AL 36542

Title: MGRM () Delete
Name: LYNN, BRAD
Address: 26661 HARBOR RIDGE DRIVE
City-St-Zip: ORANGE BEACH, AL 36561

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: DICKINSON, PAM
Address: 126 COVE AVE, STE 1
City-St-Zip: GULF SHORES, AL 36542 43

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: PAM DICKINSON

MGR

04/23/2007

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