

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003581

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: MORTGAGE ASSOCIATES LLC

## Current Principal Place of Business:

375 CITY CENTER STE. G  
OSHKOSH, WI 54901

## New Principal Place of Business:

448 NORTH MAIN STREET  
SUITE 200  
OSHKOSH, WI 54901 49

## Current Mailing Address:

375 CITY CENTER STE. G  
OSHKOSH, WI 54901

## New Mailing Address:

448 NORTH MAIN STREET  
SUITE 200  
OSHKOSH, WI 54901 49

FEI Number: 56-2451891

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BIGLER, TIM  
1342 MARLEE ROAD  
SWITZERLAND, FL 32259 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: JAHNKE, JEFFREY A  
Address: 375 CITY CENTER STE. G  
City-St-Zip: OSHKOSH, WI 54901

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: JAHNKE, JEFFREY A  
Address: 448 NORTH MAIN STEET  
City-St-Zip: OSHKOSH, WI 54901 49

Title: MGRM ( ) Change (X) Addition  
Name: SURPRISE, CRAIG  
Address: 3701 E EVERGREEN DRIVE  
City-St-Zip: APPLETON, WI 54913

Title: MGRM ( ) Change (X) Addition  
Name: CASSIANI, JULIE  
Address: 3701 E EVERGREEN DRIVE  
City-St-Zip: APPLETON, WI 54913

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: JEFFREY A. JAHNKE

MGRM

04/28/2006

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