

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000184

Entity Name: ALPINE MORTGAGE SERVICES, LLC

FILED
Jan 12, 2006
Secretary of State

Current Principal Place of Business:

4606 NORTHWEST PLAZA SUITE M
ZIONSVILLE, IN 46077

New Principal Place of Business:

4600 NORTHWEST PLAZA
SUITE M
ZIONSVILLE, IN 46077

Current Mailing Address:

4606 NORTHWEST PLAZA SUITE M
ZIONSVILLE, IN 46077

New Mailing Address:

4600 NORTHWEST PLAZA
SUITE M
ZIONSVILLE, IN 46077

FEI Number: 35-2151852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, NANCY L
2400 E. SILVER PALM RD
BOCA RATON, FL 33432 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: BROWN, GEOFFREY C
Address: 4606 NORTHWEST PLAZA SUITE M
City-St-Zip: ZIONSVILLE, IN 46077

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BROWN, GEOFFREY C
Address: 4600 NORTHWEST PLAZA SUITE M
City-St-Zip: ZIONSVILLE, IN 46077

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: GEOFFREY C. BROWN

MGRM

01/12/2006

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