


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2006 08:00 AM
Secretary of State

DOCUMENT # M05000000545

1. Entity Name
JVC MORTGAGE, LLC



Principal Place of Business
**880 MULL AVENUE, SUITE #102
 AKRON, OH 44313**

Mailing Address
**880 MULL AVENUE, SUITE #102
 AKRON, OH 44313**

DO NOT WRITE IN THIS SPACE



02102006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 76-0777650	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2006**

1100000451086
 03/10/06-80035-004 55.00

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CAVILEER, JAMIE 880 MULL AVENUE, SUITE #102 AKRON, OH 44313
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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 606, Florida Statutes.

SIGNATURE: *Jamie Cavileer* **2/23/06** **330-608-8053**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #