## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000001021

**Current Principal Place of Business:** 

Entity Name: CHASE HOME FINANCE LLC

FILED Jan 02, 2008 Secretary of State

**New Principal Place of Business:** 

194 WOOD AVENUE SOUTH ISELIN, NJ 08830

Current Mailing Address:

New Mailing Address:

194 WOOD AVENUE SOUTH ISELIN, NJ 08830

FEI Number: 20-1897196 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LOWMAN, DAVID B
 Name:

 Address:
 194 WOOD AVENUE SOUTH, FLOOR 4
 Address:

 City-St-Zip:
 ISELIN, NJ 08830
 City-St-Zip:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

Name: GARVEY, THOMAS M Name: O'HARA, LAURA

Address: 194 WOOD AVENUE SOUTH Address: 194 WOOD AVENUE SOUTH

City-St-Zip: ISELIN, NJ 08830 City-St-Zip: ISELIN, NJ 08830

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition Name: CONNER, BRAD L Name:

Address:201 N.CENTRAL AVENUE, FLOOR 32Address:City-St-Zip:PHOENIX, AZ 85004City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GREAVES, KIM D
 Name:

 Address:
 3415 VISION DRIVE FLOOR 1
 Address:

 City-St-Zip:
 COLUMBUS, OH 43219
 City-St-Zip:

Name: O'HARA, LAURA Name: SANCHEZ, PABLO

Address: 194 WOOD AVENUE SOUTH, FLOOR 2 Address: 1390 TIMBERLAKE MANOR PKWY, FLOOR 1

City-St-Zip: ISELIN, NJ 08830 City-St-Zip: CHESTERFIELD, MO 63017

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 MILLER, JAMÉS A
 Name:
 MILLER, JAMÉS A

 Address:
 4501 NEW YORK AVE FL 1°
 Address:
 4501 NEW YORK AVE FL 1

 City-St-Zip:
 ARLINGTON, TX 76018
 City-St-Zip:
 ARLINGTON, TX 76018

I hereby certify that the information supplied with this filing does not qualify 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: LAURA O'HARA MGR 01/02/2008