

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000001711

**FILED**  
**Feb 03, 2010**  
**Secretary of State**

**Entity Name:** 1ST ATLANTIC MORTGAGE, LLC

**Current Principal Place of Business:**

11447 CRONHILL DRIVE  
SUITE B  
OWINGS MILLS, MD 21117

**New Principal Place of Business:**

**Current Mailing Address:**

11447 CRONHILL DRIVE  
SUITE B  
OWINGS MILLS, MD 21117

**New Mailing Address:**

**FEI Number:** 20-1560271

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAPHAELY, NAFTALI  
1506 WHITEHALL DRIVE  
#404  
FT. LAUDERDALE, FL 33324 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  
**Name:** RAPHAELY, TALI  
**Address:** 11447 CRONHILL DRIVE, SUITE B  
**City-St-Zip:** OWINGS MILLS, MD 21117

**Title:** MGRM  
**Name:** BERGER, MATTHEW L  
**Address:** 11447 CRONHILL DRIVE SUITE B  
**City-St-Zip:** OWINGS MILLS, MD 21117

I hereby 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:** TALI RAPHAELY

MGRM

02/03/2010

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