

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004561

FILED
May 30, 2006
Secretary of State

Entity Name: CITIZENS FIRST MORTGAGE L.L.C.

Current Principal Place of Business:

525 WATER STREET
PORT HURON, MI 48060

New Principal Place of Business:

Current Mailing Address:

525 WATER STREET
PORT HURON, MI 48060

New Mailing Address:

FEI Number: 37-1429918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GRAHAM, KEVIN H
101 EAST KENNEDY BOULEVARD STE 2800
TAMPA, FL 33602 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:

Title: MGR () Delete
Name: CAMPBELL, MARSHALL J
Address: 525 WATER STREET
City-St-Zip: PORT HURON, MI 48060

Title: MGR () Delete
Name: REGAN, TIMOTHY D
Address: 525 WATER STREET
City-St-Zip: PORT HURON, MI 48060

Title: MGR () Delete
Name: BRANDEWIE, DOUGLAS
Address: 525 WATER STREET
City-St-Zip: PORT HURON, MI 48060

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DOUGLAS E. BRANDEWIE

MR

05/30/2006

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