

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90148 050 ****50.00

DOCUMENT # M05000005007

1. Entity Name
LEND SELECT MORTGAGE LLC



Principal Place of Business
**1317 ROUTE 73, SUITE 201
MT. LAUREL, NJ 08054**

Mailing Address
**1317 ROUTE 73, SUITE 201
MT. LAUREL, NJ 08054**

20036331



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04202006 Chg-LLC CR2E083 (11/05)

4. FEI Number

203166954

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
JOSEPH, STEPHEN H
1317 ROUTE 73, SUITE 201
MT. LAUREL, NJ 08064** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
RUMBOS, CHRISTOPHER
1317 ROUTE 73, SUITE 201
MT. LAUREL, NJ 08054** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
KILDEA, DENNIS
1317 ROUTE 73, SUITE 201
MT. LAUREL, NJ 08054** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

856-866-5555

Daytime Phone #



ATTACHMENT
20036351

Lend Select Mortgage LLC

1317 Route 73, Suite 201
Mt. Laurel, NJ 08054
Ph: 856-866-5555
FAX: 856-866-5656

April 21, 2006

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Enclosed you will find the 2006 Limited Liability Company Annual Report for Lend Select Mortgage LLC Document # M05000005007 and a check in the amount of \$50.00 payable to Florida Department of State.

Please contact me at the above phone number or at my email address dklidea@lendselectmortgage.com with any questions.

Sincerely,

Dennis Kildea
Enclosure.