

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000325

Entity Name: ADVISOR MORTGAGE LLC

FILED  
Apr 14, 2008  
Secretary of State

**Current Principal Place of Business:**

1532 ROUTE 9  
CLIFTON PARK, NY 12065

**New Principal Place of Business:**

**Current Mailing Address:**

1532 ROUTE 9  
CLIFTON PARK, NY 12065

**New Mailing Address:**

PO BOX 6774  
FREEHOLD, NJ 07728

FEI Number: 14-1834977

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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 ( ) Delete  
Name: HEINSOHN, PAUL H  
Address: 1532 ROUTE 9  
City-St-Zip: CLIFTON PARK, NY 12065

Title: MGRM ( ) Delete  
Name: SMITH, PATRICK  
Address: 1532 ROUTE 9  
City-St-Zip: CLIFTON PARK, NY 12065

**ADDITIONS/CHANGES:**

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 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: PAUL H. HEINSOHN

EVP

04/14/2008

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