

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002859

FILED  
Jul 07, 2008  
Secretary of State

**Entity Name:** FIRST AMERICASA MORTGAGE LLC

**Current Principal Place of Business:**

23 HOWE AVE. 2ND FLOOR  
PASSAIC, NJ 07055

**New Principal Place of Business:**

23 HOWE AVE.  
2ND FLOOR  
PASSAIC, NJ 07055

**Current Mailing Address:**

23 HOWE AVE. 2ND FLOOR  
PASSAIC, NJ 07055

**New Mailing Address:**

23 HOWE AVE.  
2ND FLOOR  
PASSAIC, NJ 07055

FEI Number: 20-4142099      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:**

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.  
4435 OLD WINTER GARDEN RD  
ORLANDO, FL 32811 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: MGRM ( ) Delete  
Name: RIVAS, WILLIAM  
Address: 23 HOWE AVE. 2ND FLOOR  
City-St-Zip: PASSAIC, NJ 07055

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: WILLIAM RIVAS

PRES

07/07/2008

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