2006 LIMITED LIABILITY COMPANY ANNUAL REPORT						FILED May 01, 2006 8:00 am				
DOCUMENT # M9600000085 1. Entity Name DECISION ONE MORTGAGE COMPANY, LLC, L.C.							Secretary of State 05-01-2006 90049 027 ****50.00			
Principal Place 6060 J.A. JON STE 1000 CHARLOTTE,	NES DRIVE	Mailing Address 2700 SANDERS RD. TAX DEPT - 2S PROSPECT HEIGHTS, IL 60070			-		IN INTER BUTTI NETTI NETTI NATI	Renn an it oant and in ei a		
•	ace of Business	3. Mailing Address 6060 J.A. Jones Drive								
Suite, Apt.	·	Suite 800				04272006	Chg-LLC	CR2E083 (11/05)	polied For	
Zip	Country	Zip Country			56-1960744			\$5.00 to	t Applicable	
	6. Name and Address of Current F	28287	US				e of Status Desired	Fee Require		
C T CORPORATION SYSTEM				Name		7. (4amis an	Address of new hi	-gistered Agent		
1200 SOU PLANTATI			Street Address (P.O. Box Number is Not Acceptable))	· · · · ·			
				······································						
8. The above named entity submits this statement for the purpose of changing its rec				<u> </u>					e	
the obligati	Signature, typed or printed name of registered agent a	· · ·	-	-	-	when reinstating)		DATE		
Fi						check payable to Department of State	9			
9.	MANAGING MEMBERS/MANAGERS					·	ADDITIONS/			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRD J C FAULKNER 6060 J.A. JONES <u>DBIVE</u> C <u>HABLOTTE, NC</u> 28209			T ADDRESS ST-ZIP	una	rlotte, N	Manager ito les Drive C 28287	🗋 Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP FATINA, D.J. 2700 SANDERS RD PROSPECT HEIGHTS, IL 60070	60070		T ADDRESS ST-7IP	Senic Willi 6060	avn A. V J.A. Jou Holte, N	anager Narkwat 1es Driver	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPT HOLCOMB, M.J. 6060 J.A. JONES DRIVE CHARLOTTE, NC 28287	Delete	TITLE NAME STREE					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPC Double WORWA, C.K. 2700 SANDERS RD PROSPECT HEIGHTS, IL 60070			T ADDRESS ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS ANGELO, J.M. 2700 SANDERS RD. PROSPECT HEIGHTS, IL 60070	🗋 Delete	TITLE NAME STREE					🗌 Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Dolete	TITLE NAME STREE	<u> </u>				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: MJJJJJJJJJJJJJJJJJJJJJJJJJJJJJJJJJJJJ										

ATTACHMENT

2063440

Decision One Mortgage

Member HSBC 👁 Group

6060 JA Jones Drive Suite 800 Charlotte, North Carolina 28287

April 27, 2006

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

Dear Sir or Madam,

Please find enclosed the completed 2006 Florida Limited Liability Company Annual Report, as well as the \$50 filing fee.

If you have any questions or need additional information, please contact me at 704-409-5859.

Sincerely,

mse

Liz Ross Senior Accountant - Regulatory Reporting

Enclosure