

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 18, 2006 08:00 AM
Secretary of State

DOCUMENT # A97000002504

1. Entity Name

THE CENTURY TITLE AGENCY, LTD.



Principal Place of Business

**1555 PALM BEACH LAKES BLVD.
SUITE 500
WEST PALM BEACH, FL 33401**

Mailing Address

**1555 PALM BEACH LAKES BLVD.
SUITE 500
WEST PALM BEACH, FL 33401**



01062006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

85-0795019

(Applied For)

(Not Applicable)

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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.

**FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **H93554**
NAME **UNIVERSAL LAND TITLE, INC.**
STREET ADDRESS **1555 PALM BEACH LAKES BLVD., SUITE 500**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

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**UNIVERSAL LAND TITLE, INC.
01/23/06-80021-007 500.00**

**DO NOT WRITE
IN THIS SPACE**

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Michael J. Glass
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-6-06 5616898200
Date Daytime Phone #

STAPLE CHECK HERE