


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # L04000039273</b> 1. Entity Name LEGAL LAND TITLE, LLC	
---	---

**FILED**  
**Jul 07, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business 860 US HIGHWAY ONE SUITE 109 NORTH PALM BEACH, FL 33408 US	Mailing Address 860 US HIGHWAY ONE SUITE 108 NORTH PALM BEACH, FL 33408 US
---	---



07012008 No Chg-LLC      CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  HILLEY & WYANT-CORTEZ, P.A. 860 US HIGHWAY ONE SUITE 108 NORTH PALM BEACH, FL 33408	<p style="font-size: 24px; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
---	---

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: *V. Cortez*      *V. Cortez-Wyant-Cortez, President*      *7/1/08*  
Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE

**FILE NOW!!! FEE IS \$138.75**      In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.      U00000953582  
**Due by September 12, 2008**      07/07/08-80004-013 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	CORTEZ, LARRY T
STREET ADDRESS	860 US HIGHWAY ONE, SUITE 108
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

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: *Larry Cortez*      *7/1/08*      *561-627-0009*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #