2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 04, 2008 8:00 am Secretary of State DOCUMENT # L05000014700 04-04-2008 90139 020 ***138.75 1. Entity Name TOWN SQUARE TITLE MH, LLC Principal Place of Business Mailing Address 00013327 749 NORTH GARLAND AVENUE 749 NORTH GARLAND AVENUE SUITE 200 SUITE 200 ORLANDO, FL 32801 ORLANDO, FL 32801 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 250 East Colonial Drive 250 East Colonial Drive Suite, Apt. #, etc. 01172008 Chg-LLC CR2E083 (12/06) Suite 302 Suite 302 City & State City & State 4. FEI Number Applied For Orlando, Florida Orlando, Florida 34-2036326 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired 32801 **SUSAGE** 32801 **USAnge** Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent John Kingman Keating KEATING, JOHN K Street Address (P.O. Box Number is Not Acceptable) 749 NORTH GARLAND AVENUE **SUITE 101** ORLANDO, FL 32801 250 East Colonial Drive, Suite 300 Orlando, 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. MAR 3 1 2008 SIGNATURE John Kingman Keating Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$138.75 Make check payable to After May 1, 2008 Fee will be \$538.75 Florida Department of State 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. MGR MGR TITI F ☐ Defete TITLE Change ☐ Addition NAME KEATING, JOHN K John Kingman Keating NAME STREET ADDRESS 749 NORTH GARLAND AVENUE, SUITE 101 STREET ADDRESS 250 East Colonial Drive, Suite 300 CITY-ST-7IP ORLANDO, FL 32801 CITY-ST-Z#P Orlando, Florida 32801 TITLE ☐ Delete TITLE Change ☐ Addition **TOWN SQUARE TITLE COMPANY** NAME NAME Town Square Title Company STREET ADDRESS 749 NORTH GARLAND AVENUE, SUITE 101 STREET ADDRESS 250 East Colonial Drive, Suite 300 CITY-ST-ZIP ORLANDO, FL 32801 CITY-ST-ZIP Orlando, Florida 32801 TITI F ☐ Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 it 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 phapter 608, Florida Statutes. MAR 3 1 2008

RE: John Kingman Keating

CHATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

407-425-2907

Daytime Phone #

Date