

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000016038

1. Entity Name
PARK PLACE TITLE OF WINTER PARK, LLC



Principal Place of Business
**1801 LEE ROAD #260
WINTER PARK, FL 32789**

Mailing Address
**1801 LEE ROAD #260
WINTER PARK, FL 32789**



01032007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2499405

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**STEWART, BARBARA
1801 LEE ROAD #260
WINTER PARK, FL 32789**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000598634
01/24/07-80084-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STEWART, BARBARA 41 ZACHARY WADE ST WINTER GARDEN, FL 34787
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUGAN, MARY C 891 CLAYDON WAY ALTAMONTE SPRINGS, FL 32701
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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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/5/07 4078976999
Date Daytime Phone #