

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000011590

**FILED**  
**Jan 24, 2011**  
**Secretary of State**

**Entity Name:** MEMBERS TITLE AGENCY, LLC

**Current Principal Place of Business:**

6809 E. HILLSBOROUGH AVENUE  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

6809 E. HILLSBOROUGH AVENUE  
TAMPA, FL 33610

**New Mailing Address:**

**FEI Number:** 59-3673450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WHITTAKER, DEBBIE H  
6809 E. HILLSBOROUGH AVENUE  
TAMPA, FL 33610 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** DORETY, TOM R  
**Address:** 6801 E. HILLSBOROUGH AVENUE  
**City-St-Zip:** TAMPA, FL 33610 US

**Title:** MGR  
**Name:** DARLING, LINDA  
**Address:** 6801 E. HILLSBOROUGH AVENUE  
**City-St-Zip:** TAMPA, FL 33610 US

**Title:** MGR  
**Name:** WHITLOCK, EARL W  
**Address:** 6801 E. HILLSBOROUGH AVENUE  
**City-St-Zip:** TAMPA, FL 33610 US

**Title:** MGR  
**Name:** FLYNN, PETER  
**Address:** 6801 E. HILLSBOROUGH AVENUE  
**City-St-Zip:** TAMPA, FL 33610 US

**Title:** MGR  
**Name:** LOVETT, VICTORIA  
**Address:** 6801 E. HILLSBOROUGH AVENUE  
**City-St-Zip:** TAMPA, FL 33610 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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:** DEBBIE H. WHITTAKER

MGR

01/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date