

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000011206

**Entity Name:** CAPSTONE TITLE, LLC

**Current Principal Place of Business:**

9108 US HWY 19  
2ND FLOOR  
PORT RICHEY, FL 34668

**Current Mailing Address:**

7916 EVOLUTIONS WAY  
SUITE 210  
TRINITY, FL 34655 US

**FEI Number:** 59-3669207

**Certificate of Status Desired:** Yes

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

MITCHELL, D. DEWEY  
7916 EVOLUTIONS WAY  
SUITE 210  
TRINITY, FL 34655 US

*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

**Authorized Person(s) Detail :**

Title MGR  
Name STOCKTON, LARRY C  
Address 9108 US HWY 19, 2ND FLOOR  
City-State-Zip: PORT RICHEY FL 34668

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LARRY C. STOCKTON

**MANAGER**

**04/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date