

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000182517

**FILED  
Mar 01, 2019  
Secretary of State  
5094758982CC**

**Entity Name:** ALL FLORIDA PROFESSIONAL TITLE, LLC

**Current Principal Place of Business:**

2901 CURRY FORD RD.  
SUITE #4  
ORLANDO, FL 32806

**Current Mailing Address:**

2901 CURRY FORD RD.  
SUITE #4  
ORLANDO, FL 32806 US

**FEI Number: 83-1389009**

**Certificate of Status Desired: No**

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

GLENN, JAMES S ESQ.  
2901 CURRY FORD RD.  
SUITE #4  
ORLANDO, FL 32806 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	Title	MGR
Name	GLENN, JAMES S ESQ.	Name	MOODY, CHESLEY G ESQ.
Address	2901 CURRY FORD RD. UNIT #4	Address	1101 N. LAKE DESTINY DR. SUITE #200
City-State-Zip:	ORLANDO FL 32806	City-State-Zip:	MAITLAND FL 32751
Title	MGR		
Name	GLENN, PATTERSON C		
Address	2901 CURRY FORD RD. SUITE 207		
City-State-Zip:	ORLANDO FL 32806		

*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: JAMES S. GLENN, ESQ. MGR 03/01/2019  
\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail Date