

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A00000000290

**FILED**  
**Apr 25, 2007**  
**Secretary of State**

**Entity Name:** ENTERPRISE TITLE AFFILIATES OF FLORIDA, LLLP

**Current Principal Place of Business:**

15310 AMBERLY DRIVE  
SUITE 300  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

15310 AMBERLY DRIVE  
SUITE 300  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 59-3625713

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLARK, PHILLIP W  
15310 AMBERLY DRIVE SUITE 300  
SUITE 300  
TAMPA, FL 33647 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

**GENERAL PARTNER INFORMATION:**

Document #: P99000014404  
Name: ENTERPRISE TITLE AFFILIATES, INC.  
Address: 15310 AMBERLY DRIVE SUITE 300  
City-St-Zip: TAMPA, FL 33647

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: PHILLIP W CLARK

GP

04/25/2007

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date