2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 6, 2006

DOCUMENT # A01000000739

1. Entity Name AFFILIATED TITLE OF TAMPA BAY, LLLP



OG HAY - I AN 8 44

TALLAHASSEE FLORIDA

FILED

Principal Place of Business 6544 US 41 NORTH SUITE 208B APOLLO BEACH, FL 33572 Mailing Address 6544 US 41 NORTH SUITE 2088

APOLLO BEACH, FL 33572

DO NOT WRITE IN THIS SPACE



05092006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-3685545

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Name and Address of Current Registered Agent

 NAST LEONARD III

VANDERMAST, LEONARD III 6213 MARBELLA BLVD. APOLLO BEACH, FL 33572

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 The above named entity submits this statement for the purpose of changing its registered office of the obligations of registered agent. 	registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	DATE
FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006	In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION P99000110103 DOCUMENT # UNITED SETTLEMENT SERVICE AFFILIATES, INC. NAME STREET ADDRESS 6213 MARBELLA BLVD. CITY-ST-ZIP APOLLO BEACH, FL 33572 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # KAME STREET ADDRESS CITY-ST-ZIP

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14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

5/9/04

813-445-4588

Leonard Vandermast TIT