

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

DOCUMENT # A04000001894

1. Entity Name
PREMIER TITLE OF CENTRAL FLORIDA, LLLP



Principal Place of Business
**7232 SAND LAKE ROAD
SUITE 103
ORLANDO, FL 32819**

Mailing Address
**7232 SAND LAKE ROAD
SUITE 103
ORLANDO, FL 32819**

FILED
06 MAY 22 PM 12:25
**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



05092006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1825556

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PANTALEON, I. ED. ESQ.
7232 SAND LAKE ROAD, SUITE 103
ORLANDO, FL 32819**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

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

DOCUMENT # **L03000041154**
NAME **VP TITLE & TRUST, LLC**
STREET ADDRESS **7232 SAND LAKE ROAD, SUITE 103**
CITY- ST- ZIP **ORLANDO, FL 32819**

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

900075105809
05/23/06--01055--013 **500.00

**DO NOT WRITE
IN THIS SPACE**

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:

Leonard Vandumast III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

5/9/06

Date

(853-404-9770)

Daytime Phone #

STAPLE CHECK HERE

Leonard Vandumast III