

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009994

FILED  
May 29, 2009  
Secretary of State

Entity Name: TITLE OFFICES, LLC.

**Current Principal Place of Business:**

1144 W. NINE MILE RD.  
STE B  
PENSACOLA, FL 32534

**New Principal Place of Business:**

**Current Mailing Address:**

1144 W. NINE MILE RD.  
STE B  
PENSACOLA, FL 32534

**New Mailing Address:**

FEI Number: 59-3663603      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

BRYAN, MARTHA  
373 NW COLE TERRACE STE 105  
LAKE CITY, FL 32055 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STEVENSON, FRANK E  
Address: 1144 W. NINE MILE RD. STE B  
City-St-Zip: PENSACOLA, FL 32534

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FRANK STEVENSON

MGR

05/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date