

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011206

Entity Name: CAPSTONE TITLE, LLC

FILED  
Aug 06, 2008  
Secretary of State

## Current Principal Place of Business:

4821 US HWY. 19  
NEW PORT RICHEY, FL 34652

## New Principal Place of Business:

7916 EVOLUTIONS WAY  
SUITE 106  
TRINITY, FL 34655

## Current Mailing Address:

140 FOUNTAIN PARKWAY  
SUITE 210  
ST. PETERSBURG, FL 33716

## New Mailing Address:

780 CARILLON PARKWAY  
SUITE 150  
ST. PETERSBURG, FL 33716

FEI Number: 59-3669207

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, D. DEWEY  
7916 EVOLUTIONS WAY  
SUITE 106  
TRINITY, FL 34655 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

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: ROBINSON, LOIS  
Address: 7916 EVOLUTIONS WAY, SUITE 106  
City-St-Zip: TRINITY, FL 34655

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: LOIS ROBINSON

MGR

08/06/2008

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