## 2904 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L00000013555 OL TIAY -7 81110: 14 GREAT FLORIDA TITLE, L.L.C. SECHLIARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 4144 N. ARMENIA AVE. C/O COLONIAL BANK, ATTN: TAX DEPARTMENT ONE COMMERCE STREET, THIRD FLOOR, STE 308 TAMPA, FL 33677 MONTGOMERY, AL 36104 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. 04212004 Chq-LLC CR2E083 (10/03) Applied For City & State 4. FEI Number City & State 59-3558895 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code 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. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2004 Make check payable to Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS g. 10. MGR 🚺 Delete Change ☐ Addition TITLE TITI F 400035751374 BARKSDALE, ARTHUR NAME NAME 05/07/04--01043--006 STREET ADDRESS STREET ADDRESS 201 E. PINE ST. \*\*800.N0 CITY-ST-ZIP ORLANDO, FL. 32801 CITY-ST-ZIP CED TITLE MGR Delete TITLE ☐ Addition MOORE, SARAH H NAME NAME Sarah Moore STREET ADDRESS ONE COMMERCE STREET STREET ADDRESS Due Commerce ST, Montgomery, AL CITY-ST-ZIP MONTGOMERY, AL 36104 CITY-ST-ZIP MGR TITLE TITLE Delete LONDON, MICHELLE NAME NAME STREET ADDRESS ONE COMMERCE STREET STREET ADDRESS MONTGOMERY, AL 36104 CITY-ST-ZIP CITY-ST-ZIP VP-Tax (Change TITLE MGR ☐ Delete TIDE Addition REIMER, DAVID NAME NAME David Reimer STREET ADDRESS ONE COMMERCE STREET STREET ADDRESS One Commerce ST, Montgomer President Flake Oakley MONTGOMERY, AL 36104 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete NAME OAKLEY, W. FLAKE IV NAME ONE COMMERCE STREET STREET ADDRESS STREET ADDRESS MONTGOMERY, AL 36104 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE LOWDER, ROBERT E NAME NAME STREET ADDRESS ONE COMMERCE STREET STREET ADDRESS CITY-ST-ZIP MONTGOMERY, AL 36104 CITY-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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. 4/2/104 un **SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED