

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010722

FILED  
Mar 02, 2004  
Secretary of State

Entity Name: MCGILL ESCROW & TITLE, L.L.C.

**Current Principal Place of Business:**

36008 EMERALD COAST PKWY., STE. 301  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

36008 EMERALD COAST PKWY., STE. 301  
DESTIN, FL 32541

**New Mailing Address:**

FEI Number: 59-3734320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCGILL, ROBERT E III  
36008 EMERALD COAST PKWY., STE. 301  
DESTIN, FL 32541

**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/MEMBERS:**

Title: P ( ) Delete  
Name: ROBERT, MCGILL III  
Address: 36008 EMERA COAST PKY STE 301  
City-St-Zip: DESTIN, FL 32541

Title: VP ( ) Delete  
Name: DEVILLE, SHARON  
Address: 36008 EMERALD COAST PKY STE 301  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MCGILL, ROBERT E III  
Address: 36008 EMERA COAST PKY STE 301  
City-St-Zip: DESTIN, FL 32541

Title: MGR (X) Change ( ) Addition  
Name: DEVILLE, SHARON K  
Address: 36008 EMERALD COAST PKY STE 301  
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT E. MCGILL, III

MGR

03/02/2004

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