

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011544

**FILED**  
**Apr 23, 2008**  
**Secretary of State**

**Entity Name:** ALL AMERICAN TITLE & ABSTRACT, L.L.C.

**Current Principal Place of Business:**

2500 N MILITARY TRAIL STE 465  
BOCA RATON, FL 33431

**New Principal Place of Business:**

445 E. PALMETTO PARK ROAD  
BOCA RATON, FL 33432

**Current Mailing Address:**

2500 N MILITARY TRAIL STE 465  
BOCA RATON, FL 33431

**New Mailing Address:**

445 E. PALMETTO PARK ROAD  
BOCA RATON, FL 33432

**FEI Number:** 65-1121050

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RONALD LEWIS, P.A.  
2500 N MILITARY TRAIL STE 465  
BOCA RATON, FL 33431 US

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

RONALD LEWIS, P.A.  
445 E. PALMETTO PARK ROAD  
BOCA RATON, FL 33432 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: RONALD LEWIS

04/23/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: RONALD LEWIS, P.A.,  
Address: 2500 N MILITARY TRAIL STE 465  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RONALD LEWIS, P.A.,  
Address: 445 E. PALMETTO PARK ROAD  
City-St-Zip: BOCA RATON, FL 33432

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: RONALD LEWIS

MGRM

04/23/2008

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