2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2007
Secretary of State

DOCUMENT# L01000013556

Entity Name: TWIN RIVERS TITLE, LLC

Current Principal Place of Business:

1900 S. HICKORY ST.
SUITE B
MELBOURNE, FL 32901 US

New Principal Place of Business:

1825 RIVERVIEW DRIVE
MELBOURNE, FL 32901 US

Current Mailing Address:

1900 S. HICKORY ST.
SUITE B
MELBOURNE, FL 32901 US

New Mailing Address:

1825 RIVERVIEW DRIVE
MELBOURNE, FL 32901 US

FEI Number: 57-1159179 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FALLACE, JAMES H
1900 S. HICKORY ST.
SUITE A
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

VALLIERE, ALICE C
1825 RIVERVIEW DRIVE
MELBOURNE, FL 32901 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: ALICE C VALLIERE 02/23/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: VALLIERE, ALICE C
Address: 1900 S HICKORY ST STE B
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM (X) Delete
Name: FALLACE, JAMES H
Address: 1900 S. HICKORY ST STE B
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM (X) Delete
Name: LARKIIN, DAVID G
Address: 1900 S. HICKORY ST., STE B
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: VALLIERE, ALICE C
Address: 1825 RIVERVIEW DRIVE
City-St-Zip: MELBOURNE, FL 32901 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALICE C VALLIERE MGR 02/23/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date