

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 24, 2006
Secretary of State**

DOCUMENT# L01000018210

Entity Name: ALLIED ABSTRACT AND TITLE COMPANY, LLC

Current Principal Place of Business:

549 WYNMORE ROAD NORTH
STE 209
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

549 WYNMORE ROAD NORTH
STE 209
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3746969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, JOHN E III
549 WYNMORE ROAD NORTH
STE 209
MAITLAND, FL 32751 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: MGRM () Delete
Name: BELL, JOHN E III
Address: 549 WYNMORE ROAD NORTH, STE 209
City-St-Zip: MAITLAND, FL 32751

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

ADDITIONS/CHANGES:

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

Title: MEM () Change (X) Addition
Name: PHILLIPS, PAULINE L
Address: 549 WYMORE ROAD N STE 209
City-St-Zip: MAITLAND, FL 32751

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: JOHN E. BELL III

MM

01/24/2006

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