2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018210

Entity Name: ALLIED ABSTRACT AND TITLE COMPANY, LLC

FILED Jan 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

620 N. WYMORE ROAD STE 230 MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

620 N. WYMORE ROAD STE 230 MAITLAND, FL 32751

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

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

BELL, JOHN E III
549 WYNMORE ROAD NORTH
STE 209
MAITLAND, FL 32751 US
BELL, JOHN E III
620 WYNMORE ROAD NORTH
STE 230
MAITLAND, FL 32751 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: JOHN E BELL III 01/08/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: BELL, JOHN E III Name: BELL, JOHN E III
Address: 549 WYNMORE ROAD NORTH, STE 209 Address: 620 WYNMORE ROAD NORTH, STE 230

City-St-Zip: MAITLAND, FL 32751 City-St-Zip: MAITLAND, FL 32751

Title: MEM () Delete Title: MGR (X) Change () Addition Name: PHILLIPS, PAULINE L Name: PHILLIPS, PAULINE L

Address: 549 WYMORE ROAD N STE 209 Address: 620 WYMORE ROAD N STE 230

City-St-Zip: MAITLAND, FL 32751 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 MGRM 01/08/2007