## LIMITED LIABILITY COMPANY UMITORM BUSINESS REPORT (UBR)

## FILED Jul 10, 2002 8:00 am Secretary of State

ن م		10271	<b>\-</b>	1	/ Seci	retary (	of State
DOCUMENT # L01000018324  1. Entity Name				07-10-2002 90198 002 ***377.50			
Secu	orthy First Title	Partners of 1	Highland	5 2 LLC			
	DO NOT WRITE		in the state of the state of			- ~ ~	
2. Principal	Place of Business	3. Mailing Address	0 00				
Suite, Apt. #, etc.		7360 Bryan Dairy RD Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & Sta	ale	ZOO City & State	·····		4. FEI Number _		Applied For
		Largo, Fl.			59-375	1170	Not Applicable
Zip	Country	33777	Country		5. Certificate of Status Desire		.00 Additional Required
<b>有</b> 集员分析	The state of the s			7	. Name and Address of Curr	ent Registered Ag	jent
-6.21.Y	DO NOT W	/DITE			& First Title 1		Inc.
	•		Sirce	Address (P	6. Box Number is Not Accept	able)# <i>Z86</i>	
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· · ".·		•	City			- FI	7in Code
•	· .		J on L	argo,	FI	FL	Zip Code 33 77.7
8. The above	e named entity submits this statement fo	or the purpose of changing its	registered office	or registere	d agent, or both, in the State o	l Florida.	
SIGNATURE					`		
	Signature, typed or printed name of registered agent	Total and and a commence of the commence of th	1985 SO 1 6157 TE1 115	0. 10.214 0	Y 4485.2	DATE	
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9.	MANAGING MEMBI	ERS/MANAGERS	- A KET BARKAN OF PROPER	1,12,14,15,44	200 Sept. 1		J. 14787 4438
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CITY-ST-ZIF			CITY-ST-ZIP	1		* * *	<u> </u>
If. I hereby of indicated	certify that the information supplied with on this report is true and accurate and	this filing does not qualify for that my signature shall have the	the exemption sta ne same logal effo	sted in Sect ect as if ma	ion 119.07(3)(i), Florida Statute de under oath; that I am a ma	es. I further certify the naging member or	nat the information manager of the

Attachment 969992



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 30, 2002

SECURITY FIRST TITLE PARTNERS OF HIGHLANDS COUNTY, LLC 7360 BRYAN DAIRY RD., SUITE 200 LARGO, FL 33777

SUBJECT: SECUBITY FIRST TITLE PARTNERS OF HIGHLANDS COUNTY,

LLC

Ref. Number: L01000018324

We have received your document for SECURITY FIRST TITLE PARTNERS OF HIGHLANDS COUNTY, LLC and check(s) totaling \$377.50. However, your check(s) and document are being returned for the following:

The attached form must be completed in order to file the document.

The fee is \$50.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 302A00035020

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1	UAL REPORT		Secretary of State		1 ALLINO		/ <del>C</del>
5.	ZU9 &	DIV	ISION OF CORPORATIONS				
DOCU	MENT #		~				_
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Principal Plac	e of Business / Tita	check Mallings add 6	ise rung i				
			•		DO NOT WRIT	E IN THIS SPACE.	
					3. Date Incorporated or Qualified	3e. Date of La	st Report
					4. FEI Number		Applied For
2. Principal F	Place of Business	2a. Mailing Ad 26	dress		- FEI NUTIBER		Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt.	#, etc.		5. Certificate of Status Desired	V/ -	.75 Additional ee Required
City & Stat	te ·	27 City & Stal	e		6. Election Campaign Financing		5.00 May Be
23		28			Trust Fund Contribution	A	dded to Fees
Zip 24	Country 25	Zip 29	Country 30		8. This corporation has liability for Florida Statutes		Br 5. 199.032,
24		f Current Registered Ager	ı		10. Name and Address of New I	Registered Agent	
			81 Nan			-1-\	
	•	,	<b>82</b> Stre	et Addres	s (P.O. Box Number is Not Accepta	oie)	
			83		···		
	,		84 City			FL 85	Zip Code
31. Pursuant	to the provisions of Sections 6	607.0502 and 607.1508, Flor	ida Statutes, the above-named	corporati	on submits this statement for the pu of directors. Thereby accept the app	rpose of changing cointment as registe	its registered office ered agent. I am
familiar w	vith, and accept the obligations	of, Section 607.0505, Florid	a Statutes.				
SIGNATURE	Signature typed or printed name of requ		(NOTE: Registered Agent signal)	w beauper ex	nen reinstating! ADDITIONS/CHANGES TO OFF	DATE	CTORS IN 12
12.	OFFIC	ERS AND DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OF		nange
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CITY-ST-ZIP	by certify that the information s	supplied with this filing is value	, 6.4 CITY - ST- ZIP ntarily furnished and does not a	qualify for	the exemption stated in Section 119	.07(3)(k), Flonda SI	atutes. I further
					and that my signature shall have the eport as required by Chapter 607, F		
appears	in Block 12 or Block 13 if chan	ged, or on an attachment wi	th an address.		11		
SIGNAT	TURE:	TYPED OF ABIN PED NAME OF SIG	HING GEEV PRIOR DIRECTOR		Y Toks	Daytime P	none #
ŀ	SIGNATURE AND	THE OWNER OF SIG	HING OFFICERON DINECTOR		- Oale	Jan 6 - 1	- 1

Attachmente 1 of 2

Florida Departing professate Division of Comparations

www.sindiiz.ore

Public Inquiry

## Florida Limited Liability

# SECURITY FIRST TITLE PARTNERS OF HIGHLANDS COUNTY, LLC 59-3151170

#### PRINCIPAL ADDRESS 809 US 27 SOUTH SEBRING FL 33870

#### MAILING ADDRESS 7360 BRYAN DAIRY RD., SUITE 200 LARGO FL 33777

Document Number L01000018324

FEI Number NONE **Date Filed** 10/22/2001

State FL Status ACTIVE Effective Date NONE

ij

Total Contribution

### Registered Agent

#### Name & Address

SECURITY FIRST TITLE AFFILITATES, INC. 7360 BRYAN DAIRY RD., SUITE 200 LARGO FL 33777

### Manager/Member Detail

Name & Address	Title
NONE	

### **Annual Reports**

Report Year	Filed Date	Intangible Tax