


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

|  |   |
|--|---|
| <b>DOCUMENT # L01000022867</b><br>1. Entity Name<br>MIROMAR TITLE COMPANY, LLC |  |
|--|---|

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|--|--|
| Principal Place of Business<br>24870 BURNT PINE DRIVE<br>BONITA SPRINGS, FL 34134 US | Mailing Address<br>24870 BURNT PINE DRIVE<br>BONITA SPRINGS, FL 34134 US |
|--|--|

**DO NOT WRITE IN THIS SPACE**



01262004No Chg-LLC CR2E083 (10/03)

|  |                                |
|--|--------------------------------|
| 4. FEI Number<br>03-0404877  | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

GESCHWENDT, MARK W  
24870 BURNT PINE DRIVE  
BONITA SPRINGS, FL 34134

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2004**

U000000045547  
02/11/04-80066-001 715.00

9. MANAGING MEMBERS/MANAGERS

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | MGRM<br>MIROMAR DEVELOPMENT CORPORATION<br>24780 BURNT PINE DRIVE<br>BONITA SPRINGS, FL 34134 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** *Miromar Title Company, LLC By: Miromar Development Corporation, Its Managing Member*  
*Serry Schroyer, Executive Vice President*

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE**

*2/6/04* *239/948-3666*  
Date Daytime Phone #