2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000002390

Entity Name: INVESTOR'S TITLE, LLC

FILED Jul 31, 2003 Secretary of State

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

6704 E. FOWLER AVE. TAMPA, FL 33617

Current Mailing Address: New Mailing Address:

6704 E. FOWLER AVE. TAMPA, FL 33617

FEI Number: 04-3601856 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:

BLAND, ALBERTA P 17425 CEDARWOOD LOOP LUTZ, FL 33558

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/MEMBERS:

ADDITIONS/CHANGES:

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

 Name:
 ORT, ADAM N
 Name:
 ORT, ADAM N

 Address:
 18161 HERON WALK DR.
 Address:
 11105 CARROLLWOOD DR.

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33618

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

 Name:
 MACKINNON, ROBERT F
 Name:

 Address:
 2927 BAY SHORE POINT DR.
 Address:

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:

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

 Name:
 WEVEST, LLC,
 Name:

 Address:
 6704 E. FOWLER AVE.
 Address:

 City-St-Zip:
 TAMPA, LF 33617
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT F. MACKINNON MGRM 07/31/2003