

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 07, 2004 8:00 am**  
**Secretary of State**

05-07-2004 90004 005 \*\*\*\*50.00

**DOCUMENT # L02000012376**

1. Entity Name  
**ALLIED ABSTRACT AND TITLE COMPANY VI, LLC**



Principal Place of Business  
**549 WYMORE ROAD NORTH  
SUITE 209  
MAITLAND, FL 32751**

Mailing Address  
**549 WYMORE ROAD NORTH  
SUITE 209  
MAITLAND, FL 32751**

**24067700**



**DO NOT WRITE IN THIS SPACE**

04072004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**36-4496856**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BELL, JOHN E III  
549 WYMORE ROAD NORTH  
SUITE 209  
MAITLAND, FL 32751**

**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**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	BELL, JOHN E III
STREET ADDRESS	549 WYMORE RD N , STE 209
CITY- ST- ZIP	MAITLAND, FL 32751

TITLE	
NAME	
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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:**

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

**4/20/04 4071472820**

Date

Daytime Phone #