


2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000022969 1. Entity Name MIDFLORIDA TITLE PROFESSIONALS, L.L.C.	
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Principal Place of Business 3008 S. FLORIDA AVENUE LAKELAND, FL 33803	Mailing Address 3008 S. FLORIDA AVENUE LAKELAND, FL 33803
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DO NOT WRITE IN THIS SPACE



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 51-0423632	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent MILLER, RICHARD A 2323 S. FLORIDA AVENUE LAKELAND, FL 33803
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007	U00000622621 02/13/07-80033-006 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR MILLER, RICHARD A 2323 S. FLORIDA AVENUE LAKELAND, FL 33803
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR GIBSON, SANDRA 3008 SOUTH FLORIDA AVENUE LAKELAND, FL 33803
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  	1/31/07 (863) 802-4800
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>