

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90034 034 ****50.00

DOCUMENT # L02000028956

1. Entity Name
PREMIER LAND TITLE, LLC



Principal Place of Business
**3360 WOODS EDGE CIRCLE, SUITE 103
BONITA SPRINGS, FL 34134**

Mailing Address
**3360 WOODS EDGE CIRCLE, SUITE 103
BONITA SPRINGS, FL 34134**



2. Principal Place of Business
3350 Woods Edge Circle

3. Mailing Address
3350 Woods Edge Circle

Suite, Apt. #, etc.
Suite 103

Suite, Apt. #, etc.
Suite 103

04052006 Chg-LLC CR2E083 (11/05)

City & State
Bonita Springs, FL

City & State
Bonita Springs, FL

4. FEI Number
75-3086050

Applied For
☐ Not Applicable

Zip
34134

Country

Zip
34134

Country

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MCARDLE, MICHAEL W ESQ.
3350 WOODS EDGE CIRCLE, SUITE 103
BONITA SPRINGS, FL 34134**

7. Name and Address of New Registered Agent

Name
Conrad Jakubowski

Street Address (P.O. Box Number is Not Acceptable)
3350 Woods Edge Circle, Suite 103

City
Bonita Springs

State
FL

Zip Code
34134

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.

Conrad Jakubowski

Apr. 6, 2006

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
MGR

NAME
JAKUBOWSKI, CONRAD

STREET ADDRESS
3000 GULF SHORE BOULEVARD, UNIT 312

CITY-ST-ZIP
NAPLES, FL 34103

☐ Delete

TITLE
MGR

NAME
FOSTER, DAVID

STREET ADDRESS
3000 GULF SHORE BOULEVARD, UNIT 312

CITY-ST-ZIP
NAPLES, FL 34103

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

10. ADDITIONS/CHANGES

TITLE
MGR

NAME
Jakubowski, Conrad

STREET ADDRESS
3350 Woods Edge Cir Ste 103

CITY-ST-ZIP
Bonita Springs, FL 34134

☒ Change ☐ Addition

TITLE
MGR

NAME
Foster, David

STREET ADDRESS
3350 Woods Edge Cir Ste 103

CITY-ST-ZIP
Bonita Springs, FL 34134

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

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

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

Conrad Jakubowski

Apr. 6, 2006

(239) 947-7007

Date

Daytime Phone #