

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000029884

FILED
Jul 31, 2003
Secretary of State

Entity Name: 1ST CALL TITLE ASSURANCE OF FLORIDA, LLC

Current Principal Place of Business:

6704 EAST FOWLER AVENUE
TAMPA, FL 33617

New Principal Place of Business:

504 S. KINGS AVE.
BRANDON, FL 33511

Current Mailing Address:

6704 EAST FOWLER AVENUE
TAMPA, FL 33617

New Mailing Address:

504 S. KINGS AVE.
BRANDON, FL 33511

FEI Number: 47-0896096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAND, ALBERTA
6704 EAST FOWLER AVENUE
TAMPA, FL 33617

Name and Address of New Registered Agent:

BLAND, ALBERTA P
504 S. KINGS AVE.
BRANDON, FL 33511

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: ALBERTA P. BLAND

07/31/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: ORT, ADAM
Address: 504 E. KINGS AVE.
City-St-Zip: BRANDON, FL 33511

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: ADAM ORT

MGR

07/31/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date