2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031047

Entity Name: PRECISION TITLE OF FLORIDA, LLC

FILED Apr 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Clirrent Principal Place of Kilciness	NOW Principal Place of Bilgings

14055 46TH STREET, NORTH 19337 US 19 NORTH SUITE 1103 SUITE 550

CLEARWATER, FL 33762 CLEARWATER, FL 33764

Current Mailing Address: New Mailing Address:

14055 46TH STREET, NORTH 19337 US 19 NORTH SUITE 1103 SUITE 550

CLEARWATER, FL 33762 CLEARWATER, FL 33764

FEI Number: 14-1856959 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:

GULECAS, JAMES F ESQUIRE 1968 BAYSHORE BLVD. DUNEDIN, FL 34698 US

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/MANAGERS: ADDITIONS/CHANGES:

itle: MGR () Delete Title: MGR (X) Change () Addition

Name: HILL, MICHAEL S SR Name: HILL, MICHAEL S SR

Address: 14055 46TH STREET, NORTH, SUITE 1103 Address: 19337 US 19 NORTH, SUITE 550

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: CLEARWATER, FL 33764

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

 Name:
 Name:
 MCCORMICK, PATRICIA S

 Address:
 Address:
 19337 US 19 NORTH SUITE 550

 City-St-Zip:
 City-St-Zip:
 CLEARWATER, FL 33764

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

Name: FELDMAN, NATALIE

Address: Address: 19337 US 19 NORTH, SUITE 550 City-St-Zip: City-St-Zip: CLEARWATER, FL 33764

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PATRICIA MCCORMICK VP 04/16/2007