

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000033895

FILED
Oct 15, 2009
Secretary of State

Entity Name: COLONIAL REAL ESTATE TITLE, LLC

Current Principal Place of Business:

740 FLORIDA CENTRAL PARKWAY, SUITE 1004
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

740 FLORIDA CENTRAL PARKWAY, SUITE 1004
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 59-0810304 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FORD II, ALBERT E
740 FLORIDA CENTRAL PKWY STE 2008
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

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: ALBERT E. FORD, II

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KEIDAISH, PHILIP F JR.
Address: 320 W. SABAL PALM PLACE, SUITE 300
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: WHITAKER, LORI A
Address: 740 FLORIDA PKWY STE 1004
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: FORD, ALBERT E II
Address: 740 FLORIDA CENTRAL PARKWAY, SUITE 2008
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ALBERT E. FORD, II

MGR

10/15/2009

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