

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 13, 2003 8:00 am**  
**Secretary of State**

03-13-2003 90004 001 \*\*\*\*55.00

DOCUMENT # L02000035021

1. Entity Name



SECURITY FIRST TITLE OF THE SOUTH EAST, LLC

**DO NOT WRITE IN THIS SPACE**

30042128

2. Principal Place of Business

7360 Bryan Dairy Rd.

3. Mailing Address

7360 Bryan Dairy Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 200

Suite 200

City & State

City & State

Largo, FL

Largo, FL

Zip

Country

Zip

Country

33777

USA

33777

USA

4. FEI Number

05-0548423

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Douglas Bantle

Street Address (P.O. Box Number is Not Acceptable)

7360 Bryan Dairy Rd.

Suite 200

City

Largo

FL

Zip Code

33777

**DO NOT WRITE  
IN THIS SPACE**

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

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State  
DUE BY MAY 1

9. MGRM MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Security First Title Affiliates, Inc.  
7360 Bryan Dairy Rd.  
Suite 200  
Largo, FL 33777

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

VP of MGRM

2/12/03

727-549-3300

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

Date

Daytime Phone #

CR2E083B (12/02)