2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L03000012470 1. Entity Name INTEGRITY FIRST TITLE-CH, LLC Principal Place of Business Mailing Address 10312 BLOOMINGDALE AVENUE STE, A-2 10312 BLOOMINGDALE AVENUE STE. A-2 RIVERVIEW, FL 33569 RIVERVIEW, FL 33569

FILED Apr 13, 2005 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

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

02092005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 47-0915602

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

5. Name and Address of Current Registered Agent

CAMPOAMOR, JOSE M JR 10312 BLOOMINGDALE AVENUE STE A-2 RIVERVIEW, FL 33569

SIGNATURE:

DO NOT WRITE IN THIS SPACE

		IN THIS STAGE
		A Company of the Comp
5. 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.	(NOTE Registered Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2005		
9.	MANAGING MEMBERS/MANAGERS	And the state of t
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM INTEGRITY FIRST TITLE, LLC 10312 BLOOMINGDALE AVENUE STE A-2 RIVERVIEW, FL 33569	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		000000303525 04/13/05-30108-024 Ss.00
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TITLE NAME STREET ADDRESS CITY+S1-ZIP		
11. I hereby indicated limited lia	certify that the information supplied with this filing does not all on this report is true and accurate and that my signature shability company or the receiver or trystee empowered to execute the state of the company or the receiver or trystee empowered to execute the state of the company or the receiver or trystee empowered to execute the company or the receiver or trystee empowered to execute the company or the receiver or trystee empowered to execute the company or the receiver of the company	ualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information althave the same legal effect as if made under oath; that I am a managing member or manager of the utel this report as required by Chapter 608, Florida Statutes.