

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000014594

FILED
Dec 10, 2009
Secretary of State**Entity Name:** OVT TITLE AGENCY LLC**Current Principal Place of Business:**201 EAST PINE STREET
15TH FLOOR
ORLANDO, FL 32802 US**New Principal Place of Business:****Current Mailing Address:**201 EAST PINE STREET
15TH FLOOR
ORLANDO, FL 32802 US**New Mailing Address:****FEI Number:** 77-0596938**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HURT, JENNINGS L III
201 EAST PINE STREET
15TH FLOOR
ORLANDO, FL 32802 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:

Electronic Signature of Registered Agent_____
Date**MANAGING MEMBERS/MANAGERS:****Title:** MGR () Delete
Name: GIRAULO, CAMELLIA
Address: 201 EAST PINE STREET
City-St-Zip: ORLANDO, FL 32801**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: PETERSON, SCOTT
Address: 201 EAST PINE STREET
City-St-Zip: ORLANDO, FL 32801

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: SCOTT PETERSON

MGR

12/10/2009

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