2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023987

Entity Name: OWNERS ASSURANCE TITLE AGENCY, LLC

FILED Jan 03, 2006 Secretary of State

New Principal Place of Business: Current Principal Place of Business:

12276 SAN JOSE BLVD BLDG 400 STE 410 JACKSONVILLE, FL 32223

Current Mailing Address: New Mailing Address:

12276 SAN JOSE BLVD BLDG 400 STE 410 JACKSONVILLE, FL 32223

FEI Number: 13-4256610 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:

DALE, ORR ORR, DALE MGR 4441 WESCONNETT BLVD 12276 SAN JOSE BLVD. JACKSONVILLE, FL 32210 US **UNIT 410**

JACKSONVILLE, FL 32223 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: DALE ORR 01/03/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR () Delete Title: (X) Change () Addition ORR, DALE ORR, DALE MGR Name: Name:

Address: 12276 SAN JOSE BLVD, BLDG 400 STE 410 Address: 12276 SAN JOSE BLVD, UNIT 410

City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: DALE ORR 01/03/2006