2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000026671

1. Entity Name
TALLAHASSEE TITLE GROUP, LLC

Principal Place of Business	Mailing Address
1407 PIEDMONT DRIVE EAST TALLAHASSEE, FL 32308	1407 PIEDMONT DRIVE EAST TALLAHASSEE, FL 32308

DO NOT WRITE IN THIS SPACE

01072007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
06-1702081	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LINDSEY, WM. SCOTT
1407 PIEDMONT DRIVE EAST
TALLAHASSEE, FL 32308

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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   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	TEMPLES, JAMIE R
STREET ADDRESS	1407 PIEDMONT DRIVE EAST
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	MGRM
NAME	BOYD, JOSEPH R
STREET ADDRESS	1407 PIEDMONT DRIVE EAST
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	MGRM
NAME	LINDSEY, WM. SCOTT
STREET ADDRESS	1407 PIEDMONT DRIVE EAST
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	SEC
NAME	BOYD, SUE
STREET ADDRESS	1407 PIEDMONT DRIVE EAST
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/18/07-80047-022 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____   1/8/07   850-580-2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #