


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000030724

1. Entity Name
TAMPA BAY TITLE, LLC



Principal Place of Business
**5824 US HWY 19
 NEW PORT RICHEY, FL 34652**

Mailing Address
**7360 BRYAN DAIRY RD SUITE 200
 LARGO, FL 33777**

DO NOT WRITE IN THIS SPACE



04202005 No Chg-LLC CR2E083 (10/03)

4. FEI Number
01-0794661 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**FIRST AMERICAN AFFILIATES, INC.
 2075 CENTRE POINTE BOULEVARD
 TALLAHASSEE, FL 32308**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FIRST AMERICAN AFFILIATES, INC. 2075 CENTRE POINTE BOULEVARD TALLAHASSEE, FL 32308
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 04/27/05-80149-010 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Michael LaRosa VP of MGRM 4/21/05 727-549-3300

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