

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036713

FILED  
May 04, 2005  
Secretary of State

Entity Name: PROFESSIONAL TITLE & ESCROW LLC

**Current Principal Place of Business:**

880 STATE ROAD 434 EAST  
LONGWOOD, FL 32750 US

**New Principal Place of Business:**

**Current Mailing Address:**

880 STATE ROAD 434 EAST  
LONGWOOD, FL 32750 US

**New Mailing Address:**

801 SUNSET DRIVE  
SUITE E4  
JOHNSON CITY, TN 37604 US

FEI Number: 47-0932142      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

PETRUCCELLI, WILLIAM R  
405 SASSAFRAS LANE  
MT. DORA, FL 32757 US

**Name and Address of New Registered Agent:**

HASTINGS, TERRI  
8380 BAYMEADOWS ROAD  
9  
JACKSONVILLE, FL 32256 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: TERRI HASTINGS

05/04/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: KING, C. JACKSON  
Address: 449 - 8TH AVENUE DRIVE, NW  
City-St-Zip: HICKORY, NC 28601 US

Title: MGRM ( ) Delete  
Name: MEARS, KAREN H  
Address: 2201 OLD TUSCULUM ROAD  
City-St-Zip: GREENEVILLE, TN 37745 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KAREN H. MEARS

PRES

05/04/2005

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