

FILED  
May 29, 2007 8:00 am  
Secretary of State

05-01-2007 90322 024 \*\*\*\*50.00

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

5/1

|                                                                                       |                                                                                   |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT-# L03000039478<br>1. Entity Name<br>GREATER FLORIDA TITLE COMPANY VI, L.L.C. |  |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

30003000

|                                                                                     |                                                                         |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| Principal Place of Business<br>8680 COMMODITY CR<br>SUITE 200A<br>ORLANDO, FL 32819 | Mailing Address<br>8680 COMMODITY CR<br>SUITE 200A<br>ORLANDO, FL 32819 |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|



01102007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

|                             |                               |
|-----------------------------|-------------------------------|
| 4. FEI Number<br>57-1190417 | Applied For<br>Not Applicable |
|-----------------------------|-------------------------------|

|                                  |                                                                    |
|----------------------------------|--------------------------------------------------------------------|
| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$5.00 Additional Fee Required |
|----------------------------------|--------------------------------------------------------------------|

|                                                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------|
| 6. Name and Address of Current Registered Agent<br><br>KORSHAK, STEPHEN D<br>8680 COMMODITY CR<br>SUITE 200A<br>ORLANDO, FL 32819 |
|-----------------------------------------------------------------------------------------------------------------------------------|

**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

*Stephen D. Korshak*

4/26/07  
DATE

Filing Fee is \$50.00  
Due by May 1, 2007

| 9. MANAGING MEMBERS/MANAGERS                   |                                                                                |
|------------------------------------------------|--------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGR<br>KORSHAK, STEPHEN D<br>8680 COMMODITY CR SUITE 200A<br>ORLANDO, FL 32819 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                |

**DO NOT WRITE  
IN THIS SPACE**

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:

*Stephen D. Korshak*

5/25/07  
Date

407-345-0080  
Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Stephen D. Korshak