

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045095

**FILED**  
**Mar 24, 2004**  
**Secretary of State**

**Entity Name:** TITLE AFFILIATES OF WINDERMERE, L.L.C.

**Current Principal Place of Business:**

4900 CREEKSIDE DRIVE STE. F  
CLEARWATER, FL 33760

**New Principal Place of Business:**

**Current Mailing Address:**

4900 CREEKSIDE DRIVE STE. F  
CLEARWATER, FL 33760

**New Mailing Address:**

101 GATEWAY CENTRE PARKWAY  
GATEWAY ONE  
RICHMOND, VA 23235

FEI Number: 20-0544250

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KIRTLEY, WILLIAM T  
1776 RINGLING BOULEVARD  
SARASOTA, FL 34236 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: USA TITLE AFFILIATES, , INC  
Address: 4900 CREEKSIDE DRIVE  
City-St-Zip: CLEARWATER, FL 33760

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: DEBORAH FAGAN

MGRM

03/24/2004

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