


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000052712 1. Entity Name SECURE CLOSE TITLE COMPANY, LLC	
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Principal Place of Business 8106 US HIGHWAY 19 PORT RICHEY, FL 34668	Mailing Address 8106 US HIGHWAY 19 PORT RICHEY, FL 34668
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DO NOT WRITE IN THIS SPACE



04222005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0460618	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ROBBINS, MICHAEL H SHUMAKER, LOOP & KENDRICK, LLP 101 E KENNEDY BLVD, STE 2800 TAMPA, FL 33602	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable DATE

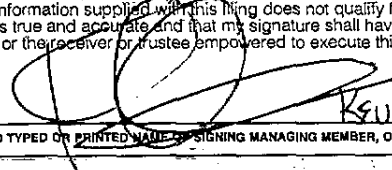
**Filing Fee is \$50.00
Due by May 1, 2005**

1100000340256
04/28/05-80107-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUSSEY, KEVIN M 4134 CENTRAL AVE SAINT PETERSBURG, FL 33711
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:  **Kevin M. Hussey** 4-27-05 727-895-3664
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #