2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP TITLE

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May 01, 2006 08:00 AM Secretary of State DOCUMENT # L03000052866 TITLÉ AFFILIATES OF REALTY PROS. L.L.C. Mailing Address Principal Place of Business 101 GATEWAY CENTRE PARKWAY 4900 CREEKSIDE DRIVE, SUITE F CLEARWATER, FL 33760 **GATEWAY ONE** RICHMOND, VA 23235 04272006 No Cho-LLC CRZE083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0544339 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE KIRTLEY, WILLIAM T 1776 RINGLING BOULEVARD SARASOTA, FL 34236 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 DATE INDIE. Registered Agent signature required when reinstelling) Signature, typed or printed name of registered agent and title it applicable. Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS MGRM TITLE USA TITLE AFFILIATES, INC NAME 101 GATEWAY CENTRE PARKWAY STREET ADDRESS U00000549303 05/13/06-80010-025 58.88 CITY-ST-ZIP RICHMOND, VA 23235 7177 F NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE SHIE STREET ADDRESS CITY-ST-ZIP NAME

FILED

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 inclicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a menaging 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.