

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007978

FILED  
Aug 16, 2005  
Secretary of State

**Entity Name:** NEWSTAR TITLE & ABSTRACT, LLC

**Current Principal Place of Business:**

6237 MIRAMAR PARKWAY  
HOLLYWOOD, FL 33023

**New Principal Place of Business:**

7771 W. OAKLAND PARK BLVD  
223  
SUNRISE, FL 33351

**Current Mailing Address:**

7614 BRIAR CLIFF CIRCLE  
LAKE WORTH, FL 33467

**New Mailing Address:**

7771 W. OAKLAND PARK BLVD  
223  
SUNRISE, FL 33351

FEI Number: 20-0631658      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:**

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

MEDACIER, ADENET  
16229 OPAL CREEK DRIVE  
WESTON, FL 33331      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR      (X) Delete  
Name: BLEMUR, ANIS  
Address: 2340 S.W. 67TH LANE  
City-St-Zip: MIRAMAR, FL 33023

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

Title: MGR      ( ) Delete  
Name: HENDRICKSEN, PAUL  
Address: 7614 BRIAR CLIFF CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467

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

Title: MGR      ( ) Delete  
Name: MEDACIER, ADENET  
Address: 16229 OPAL CREEK DRIVE  
City-St-Zip: WESTON, FL 33331

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: PAUL HENDRICKSEN

MGR

08/16/2005

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