## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jan 26, 2005 8:00 am Secretary of State

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DECUMENT # L0400031318  1. Entity Name SUN GULF TITLE OF ORLANDO L.L.C.							5 90060 038 ***:	
Direct None	Mailian Adalaan			1		20004113	!	
Principal Place of Business		Mailing Address			,		₩0004119	l
31564 US HWY 19 NORTH Palm Harbor, FL 34684		31564 US HWY 19 NORTH						
PALINI HARDU	JK, FL 34004	PALM HARBOR, FL 34	004	•	•			•
		•				BERN ETRU BERN BERN EFR	L <b>erine</b> (ii <b>a</b> ) ii <b>taa</b> (ii <b>a)</b> ii <b>ts</b> ) ii	
2. Principal Place of Business		3. Mailing Address		1				
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Suite, Apt. #, etc.		Suite, Apt. #, etc.		01142005	Chg-LLC	CR2E083 (10/03)		
City & State	9	City & State			4. FEI Numbe	アハコハフ		pplied For
77 35				<u> </u>	:00=1X	50302		ot Applicable
Zip	Country	Zip	Coun	try	5. Certificate	of Status Desired	□ \$5.00 Ad Fee Require	
	6. Name and Address of Current	Registered Agent	<u> </u>		7 Name and	Address of New R		-
	o. Name and Address of Carrent	riogiotorea Agent		Name	71 Hamoune	A00.000 01.10# 11	ogistore rigent	
GUJU, MIC	CHAELJ .							
31564 US		•	Street Address (	ss (P.O. Box Number is Not Acceptable)				
PALM HA	RBOR, FL 34684							
				City			FL Zip Coo	de
O The share		s the entire land of the entire land	:			h in the Ctate of Clo		and appent
	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registere	ed dilice or registe	red agent, or bot	n, in the State of Fid	mua. Tam tamiliai willi	, and accept
SIGNATURE .	Signature, typed or printed name of registered egent a	and title if emplicable (NOT	E: Registere	d Agent signature require	d when reinstating)		DATE	
	7 (3)	(10.0				<del></del>	*	
:	· .				- 1	Mak	e check payable to	
D	iling Fee is \$50.00 ue by May 1, 2005				1		Department of Sta	te
9.	MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/	CHANGES	
TITLE	MGRM 4	☐ Detete	TITLE	E			☐ Change	Addition
NAME	GUJU, MICHAEL J		NAM	_				
STREET ADDRESS	31564 US HWY 19 NORTH			ET ADORESS				
CITY-ST-ZIP	PALM HARBOR, FL 34684		CITY	-ST-ZIP				
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NAME	EQUITY NATIONAL TITLE, L.L.C	3. 21	NAM	1				
STREET ADDRESS	31564 US HWY 19 NORTH			ET ADORESS -		•	<u></u>	
CITY-SI-ZIP	PALM HARBOR, FL 34684		CITY	-ST-ZIP				
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TITLE NAME STREET ADDRESS		-	TITEL NAM STRE	E RE EET ADDRESS '- ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAM STRE CITY	E EET ADDRESS '- ST- ZIP E	· ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		-	TITEL NAM STRE CITY TITE	E EET ADDRESS '- ST- ZIP E				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		-	TITLL NAM STRE CITY TITL NAM STRI	E LE EET ADDRESS '-ST-ZIP E				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby	certify that the information supplied with	Detete	TITLE NAME STREE CITY TITLE NAME STREE CITY OF the exe	E  SEET ADDRESSSTZIP  E  EET ADDRESSSTZIP  E  ET ADDRESSSTZIP  Demption stated in S	ection 119.07(3)	i), Florida Statutes.	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby	certify that the information supplied with on this report is true and accurate and ability company or the receiver or truste	Delete  This filling does not qualify to that my signature shall have	TITLE NAMESTRIC CITY TITLE NAMESTRIC CITY OF the exe	E  EET ADDRESSST-ZIP  E  EET ADDRESSST-ZIP  DEFINITION Stated in S  e lengt offect as if	made under oath	i: Inat I am a manai	☐ Change	☐ Addition