

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039554

**FILED**  
**Apr 18, 2005**  
**Secretary of State**

**Entity Name:** UNION CAPITAL TITLE & ABSTRACT, L.C.

**Current Principal Place of Business:**

3820 N.W. 101ST DRIVE  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

3820 N.W. 101ST DRIVE  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 56-2452554

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUMORE, C. ANTHONY  
540 EAST MCNAB ROAD, SUITE C  
POMPANO BEACH, FL 33060 US

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

RUMORE, C. ANTHONY  
450 LAS OLAS BLVD  
SUITE 1100  
FT LAUDERDALE, FL 33301 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: \_\_\_\_\_

04/18/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

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

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

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: SEAN, MONACO  
Address: 450 LAS OLAS BLVD S-1100  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: MGR ( ) Change (X) Addition  
Name: C ANTHONY, RUMORE  
Address: 450 LAS OLAS BLVD S-1100  
City-St-Zip: FT LAUDERDALE, FL 33301

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: SEAN MONACO

MGR

04/18/2005

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