2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 10, 2006 8:00 am Secretary of State

DOCUMENT # L04000047766							04-10-2006 90034 004 ****50.00				
1. Entity Name EXCELLENT TITLE ASSOCIATES, L.L.C.											
Principal Place 3350 WOODS BONITA SPRI	S EDGE CIRC	CLE, SUITE 103	Mailing Address 3350 WOODS EDGE CIRCLE, SUITE 103 BONITA SPRINGS, FL 34134		109(1)	AU AU CENI SISU SCIII ĈŜNI ĈŜ	II 281H SIPH IPP	BIL 44878 BININ B11	BP1 1881		
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		040520	06 Chg-LLC	CR2E0	83 (11/05)				
City & State		City & State			4. FEI N. 20-1	mber 562679	•	⊢	plied For t Applicable		
Zip	ip Country		Zip Coun		у	5. Certificate of Status Desired S5.00 Additional Fee Required					
	6. Name	and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent						
JAKUBOWSKI, CONRAD					Name						
	DDS EDGI	E CIRCLE, SUITE 103	Street Address		ess (P.O. Box No	umber is Not Acceptable	3)				
				-	City				Zip Code	e	
						FL Zip Code					
	named entit		the purpose of changing its	registered	d office or reg	gistered agent, o	r both, in the State of Flo	orida. I am i	familiar with,	and accept	
CICNIATURE											
SIGNATURE .	Signature, typed	d or printed name of registered agent a	and title if applicable. (NOTE	: Registered	Agent signature re	equired when reinstation	9)	DATE			
Fi	lling Fee	or printed name of registered agent a	and tile if applicable. (NOTI	E: Registered /	Agent signature re	equired when reinstatin	Mai	e check p	ayable to ent of State	9	
Fi	lling Fee	is \$50.00		E: Registered /	Agent signature re	equired when reinstabn	Mai	e check p a Departm	ent of State	9	
Fi	lling Fee	is \$50.00 y 1, 2006		·		equired when reinstabn	Mai Florid	e check p a Departm	ent of State	e Addition	
9. TITLE NAME	MGR PREMIER	is \$50.00 y 1, 2006 MANAGING MEMBE	RS/MANAGERS	10. TITLE NAME	M P	1GR Premier I	ADDITIONS and Title L	e check p Departm CHANGES	ent of State		
9. TITLE NAME STREET ADDRESS	MGR PREMIEF 3665 BOI	MANAGING MEMBER R LAND TITLE LLC NITA BEACH RD. SUITE	RS/MANAGERS	10. TITLE NAME STREET	M P	4GR Premier I 3350 Wood	ADDITIONS Land Title Lise Edge Cir	te check p a Departm /CHANGES	ent of State		
9. TITLE NAME	MGR PREMIEF 3665 BOI	is \$50.00 y 1, 2006 MANAGING MEMBE	RS/MANAGERS Delete #3	10. TITLE NAME STREET CITY-S	M P	4GR Premier I 3350 Wood	ADDITIONS and Title L	te check p a Departm /CHANGES	Change	Addition	
9. TITLE NAME STREET ADDRESS	MGR PREMIEF 3665 BOI	MANAGING MEMBER R LAND TITLE LLC NITA BEACH RD. SUITE	RS/MANAGERS	10. TITLE NAME STREET CITY-S TITLE NAME	T ADDRESS 3	4GR Premier I 3350 Wood	ADDITIONS Land Title Lise Edge Cir	te check p a Departm /CHANGES	ent of State		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGR PREMIEF 3665 BOI	MANAGING MEMBER R LAND TITLE LLC NITA BEACH RD. SUITE	RS/MANAGERS Delete #3	10. TITLE NAME STREET CITY-S TITLE NAME	T ADDRESS 3 ST-ZIP . B	4GR Premier I 3350 Wood	ADDITIONS Land Title Lise Edge Cir	te check p a Departm /CHANGES	Change	Addition	
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11. I hereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accorded 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 of trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

NAME

STREET ADDRESS CHTY-ST-ZIP

Conrad Jakubowski Apr. 6, 2006 (239

(239) 947-7007

Daytme Phone #