2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000047864

1. Entity Name CLP TITLE LLC

FILED
May 01, 2006 08:00 Al
Secretary of State

Principal Place of Business C/O CASTO SOUTHEAST LLC 401 N. CATTLEMAN ROAD, STE. 108 SARASOTA, FL 34232 Mailing Address
C/O CASTO SOUTHEAST LLC
401 N. CATTLEMAN ROAD, STE. 108
SARASOTA, FL 34232



04212006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 43-2053876 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BAXTER, MARY PATRICIA ESQ 401 N. CATTLEMAN ROAD, STE. 108 SARASOTA, FL 34232

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chains of registered agent.	anging its registered office or registered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE			DATE
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2006 MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	BAXTER, MARY PATRICIA ESQ	. <u>-</u>	
STREET ADDRESS	401 N. CATTLEMAN ROAD, STE. 108		
City-St-ZiP	SARASOTA FL 34232	•	

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05/13/05-80051-025 50.00

TITLE MGRM CASTO SOUTHEAST LLC NAME 401 N. CATTLEMAN ROAD, STE. 108 STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34232 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

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 indicated on this report is true and accurate 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Thum Z

FRANK S BENSON, III

APRIL 26, 2006

614-228-5331

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

Date

Daytime Phone #