

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Feb 12, 2007 08:00 AM
Secretary of State**

DOCUMENT # L04000061548

1. Entity Name

PREMIER TITLE & ABSTRACT, LLC



Principal Place of Business

**455 DOUGLAS AVE. SUITE 1755
ALTAMONTE SPRINGS, FL 32714**

Mailing Address

**455 DOUGLAS AVE. SUITE 1755
ALTAMONTE SPRINGS, FL 32714**



01302007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1512222

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WILLIAMS, BRANDY
455 DOUGLAS AVE.
SUITE 1755
ALTAMONTE SPRINGS, FL 32714**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	H&S OF WINTER PARK, INC.
STREET ADDRESS	455 DOUGLAS AVE. SUITE 1755
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714

TITLE	
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02/21/07-00066-024 50.00

**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:

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

Date

Daytime Phone #

2/7/07 4078314844