

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 30, 2005  
Secretary of State**

DOCUMENT# L04000073691

Entity Name: CHAMPIONSHIP TITLE, LLC

**Current Principal Place of Business:**

201 E. PINE ST.  
15TH FLOOR  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

201 E. PINE ST.  
15TH FLOOR  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

HURT, JENNINGS L III  
201 E. PINE STREET  
15TH FLOOR  
ORLANDO, FL 32801 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title:                      MGRM                      ( ) Delete  
Name:                      HURT, JENNINGS L III  
Address:                      201 E. PINE STREET, 15TH FLOOR  
City-St-Zip:                      ORLANDO, FL 32801

**ADDITIONS/CHANGES:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JENNINGS L HURT

MGRM

04/30/2005

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