2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2006
Secretary of State

DOCUMENT# L04000075241

Entity Name: COOPERATIVE TITLE AND ESCROW, LLC

Current Principal Place of Business:

5655 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

5655 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-1889138 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OUELLETTE, ADAM J ESQ
ONE FINANCIAL PLAZA
100 S.E. 3D AVENUE, SUITE 2108
FORT LAUDERDALE, FL 33394 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/MANAGERS:

Title: MGRM ( ) Delete
Name: SPINK, RODGER L
Address: 100 S.E. 3RD AVENUE, SUITE 2108
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: MGRM ( ) Delete
Name: OUELLETTE, ADAM J
Address: 100 S.E. 3RD AVENUE, SUITE 2108
City-St-Zip: FORT LAUDERDALE, FL 33394

ADDITIONS/CHANGES:

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

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 Chapter 119, 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: ADAM J. OUELLETTE MGMS 03/17/2006

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