2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094141

Current Principal Place of Business:

Entity Name: PALMETTO TITLE SUPPORT SERVICES, LLC

FILED Apr 26, 2007 Secretary of State

(X) Change () Addition

New Principal Place of Business:

1111 DELAWARE AVENUE FT. PIERCE, FL 33450 **Current Mailing Address: New Mailing Address:** 511 SW N CAROLINA DRIVE STUART, FL 33496 FEI Number: 20-2066680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NORVELL, PAMELA W 511 SW N CAROLINA DRIVE STUART, FL 33496 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: ADDITIONS/CHANGES:

Title:

MGR () Delete NORVELL, LEAHA L

Name: NORVELL, LEAHA L
Address: 4780 N CITATION DRIVE APT101 Address: NORVELL, LEAHA L
Address: 511 SW NORTH CAROLINA DRIVE

City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: STUART, FL 34994

Title: MGR () Delete Title: () Change () Addition

 Name:
 NORVELL, MEGAN D
 Name:

 Address:
 511 SW N CAROLINA DRIVE
 Address:

 City-St-Zip:
 STUART, FL 33496
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition Name: NORVELL, PAMELA Name:

Address: 511 SOUTHWEST NORTH CAROLINA DRIVE Address: City-St-Zip: STUART, FL 34994 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PAMELA NORVELL MGRM 04/26/2007