

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094397

FILED
Jul 06, 2006
Secretary of State

Entity Name: FREEDOM TITLE, LC

Current Principal Place of Business:

3030 N ROCKY POINT DR SUITE 230
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

3030 N ROCKY POINT DR SUITE 230
TAMPA, FL 33607

New Mailing Address:

FEI Number: 90-0080733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RON BARKSDALE
1913 STANCEL DRIVE
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

LAURIE SHORES
1776 THAMES ST.
CLEARWATER, FL 33755 US

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: LAURIE SHORES

07/06/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OVERSTREET, KEVIN J
Address: 12312 OLIVE STREET BLVD., STE 100
City-St-Zip: ST. LOUIS, MO 63141

Title: MGR (X) Delete
Name: WOJJECK, MICHAEL D
Address: 12312 OLIVE STREET BLVD., STE 100
City-St-Zip: ST. LOUIS, MO 63141

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OVERSTREET, KEVIN J
Address: 5812 MARINER'S WAY
City-St-Zip: TAMPA, FL 33615

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: KEVIN OVERSTREET

MGR

07/06/2006

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