## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001861

Entity Name: IMAGE TITLE AND ESCROW, LLC

FILED Aug 18, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3550 W. WATERS AVENUE, SUITE 280 3550 W. WATERS AVENUE TAMPA, FL 33614

SUITE 280

TAMPA, FL 33614

**Current Mailing Address: New Mailing Address:** 

3550 W. WATERS AVENUE, SUITE 280 3550 W. WATERS AVENUE

TAMPA, FL 33614 SUITE 280

TAMPA, FL 33614

FEI Number: 20-2118556 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

O'MACK, PATRICIA A O'MACK, PATRICIA A 3550 W. WATERS AVENUE, 3550 W. WATERS AVENUE, SUITE 280 TAMPA, FL 33614 SUITE 280 US

TAMPA, FL 33614 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: PATRICIA A. O'MACK 08/18/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

O'MACK, PATRICIA A Name: Name: Address: 3550 W. WATERS AVENUE, SUITE 280 Address: City-St-Zip: TAMPA, FL 33614 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 Statutés. 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: PATRICIA A. O'MACK 08/18/2006