

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001861

Entity Name: IMAGE TITLE AND ESCROW, LLC

FILED  
Jun 09, 2008  
Secretary of State

## Current Principal Place of Business:

3550 W. WATERS AVENUE  
SUITE 280  
TAMPA, FL 33614

## New Principal Place of Business:

3935 TAMPA ROAD  
SUITE 1  
OLDSMAR, FL 34677

## Current Mailing Address:

3550 W. WATERS AVENUE  
SUITE 280  
TAMPA, FL 33614

## New Mailing Address:

3935 TAMPA ROAD  
SUITE 1  
OLDSMAR, FL 34677

FEI Number: 20-2118556      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:

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

## Name and Address of New Registered Agent:

O'MACK, PATRICIA A  
3935 TAMPA ROAD  
SUITE 1  
OLDSMAR, FL 34677 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:

06/09/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: O'MACK, PATRICIA A  
Address: 3550 W. WATERS AVENUE, SUITE 280  
City-St-Zip: TAMPA, FL 33614

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: O'MACK, PATRICIA A  
Address: 3935 TAMPA ROAD SUITE 1  
City-St-Zip: OLDSMAR, FL 34677

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: PATRICIA O'MACK

MGRM

06/09/2008

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