

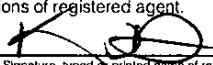
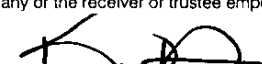


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 APR 18 AM 9:53

DOCUMENT # L05000010162 1. Entity Name REALTY ADVANTAGE TITLE, LLC					
Principal Place of Business 555 WINDERLEY PLACE, SUITE 300 MAITLAND, FL 32751			Mailing Address 555 WINDERLEY PLACE, SUITE 300 MAITLAND, FL 32751		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 20-2269725 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				04092008 Chg-LLC CR2E083 (12/06)	
6. Name and Address of Current Registered Agent HENDRICKS, KIRSTEN A 631 NORTH WYMORE ROAD MAITLAND, FL 32751			7. Name and Address of New Registered Agent Name KIRSTEN A. HENDRICKS Street Address (P.O. Box Number is Not Acceptable) 555 Winderley Place Suite 300 City MAITLAND FL Zip Code 32751		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Kirsten Hendricks DATE 4-09-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PHILLIPS, PAMELA J 1373 BLACK WILLOW TRAIL ALTAMONTE SPRINGS, FL 32714	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENDRICKS, KIRSTEN 5337 PEPPER BRUSH COVE APOPKA, FL 32703	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Kirsten Hendricks DATE 4-9-08 Dayline Phone # 407-629-7676 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					



555 Winderley Place, Suite #300, Maitland, Florida 32751
Phone: 407-629-7676 / Fax: 407-629-1718

April 9, 2008

Florida Department of State

Attn: Tammy Hampton

Re: Letter dated February 22, 2008 Reference #: W08000009285

Dear Tammy,

I have attached the letter I received from you along with the corrected information you requested.

We recently had a managing member resign from Realty Advantage Title, LLC, so I tried to file a new Articles of Organization because I thought I had to do that since a member left the company. I called your office and it was explained to me that it was not necessary to file a new Articles of Organization so I do not want to do that now.

I have filled out the 2008 Limited Liability Company Annual Report and included it with this letter. Please process the report and use the \$210.00 you already received from me towards the filing fee.

Please call if you have any questions or need anything else from me. I can be reached at the office: 407-629-7676 or my cell: 321-303-8737.

Thank you for your assistance with my confusion.

Sincerely,

Kirsten Hendricks
Managing Member



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2008

KIRSTEN HENDRICKS
555 WINDERLEY PLACE
STE 300
MAITLAND, FL 32751

SUBJECT: REALTY ADVANTAGE TITLE, LLC
Ref. Number: W08000009285

RECEIVED
08 APR 18 AM 9:41
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for REALTY ADVANTAGE TITLE, LLC and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you are trying to file an Annual Report form; however, the filing you submitted is not an Annual Report form. Instead of submitting an Annual Report form, you have submitted the document to establish an entirely new entity by the same name.

To correct this situation you must complete the enclosed annual report form and return it to my attention along with a copy of this letter and a check made payable to the Florida Department of State, if applicable. The money you submitted for the enclosed Articles of Organization, if any, will be applied to your annual report filing fee.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 008A00011079