

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030701

FILED  
May 04, 2006  
Secretary of State

**Entity Name:** TITLE ASSOCIATES OF SOUTH WALTON, L.L.C.

**Current Principal Place of Business:**

89 SIENNA COURT  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

35 CLAYTON LANE  
SUITE B  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

89 SIENNA COURT  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

35 CLAYTON LANE  
SUITE B  
SANTA ROSA BEACH, FL 32459

FEI Number: 26-0115499      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:**

HARGROVE, HOLLI M  
89 SIENNA COURT  
SANTA ROSA BEACH, FL 32459      US

**Name and Address of New Registered Agent:**

HARGROVE, HOLLI M  
35 CLAYTON LANE  
SUITE B  
SANTA ROSA BEACH, FL 32459      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: PK SMARTT

05/04/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: HARGROVE, HOLLI M  
Address: 35 CLAYTON LANE SUITE B  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: HOLLI HARGROVE

MGR

05/04/2006

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