

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000043067

FILED
Oct 01, 2007
Secretary of State

Entity Name: A CLEAR TITLE AND ESCROW EXCHANGE, L.L.C.

Current Principal Place of Business:

901 VENETIA BAY BLVD
SUITE 300
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

901 VENETIA BAY BLVD
SUITE 300
VENICE, FL 34285

New Mailing Address:

FEI Number: 20-2784896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRISH, BOB CPA
4134 GULF OF MEXICO DR. STE 211
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MM () Delete
Name: WHITTEMORE, EDWARD
Address: 901 VENETIA BAY BLVD, SUITE 300
City-St-Zip: VENICE, FL 34285

Title: MM () Delete
Name: CORMIER, STEPHEN J
Address: 818 SHAKETT CREEK DR.
City-St-Zip: NOKOMIS, FL 34275

Title: MM () Delete
Name: SAYLOR, STACY C
Address: 901 VENETIA BAY BLVD, SUITE 300
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MM (X) Change () Addition
Name: MICHALOWSKA, JUSTYNA
Address: 901 VENETIA BAY BLVD
City-St-Zip: VENICE, FL 34285

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: STEPHEN J CORMIER

MM

10/01/2007

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