2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2006
Secretary of State

DOCUMENT# L05000049516

Entity Name: LANDMARK TITLE OF SW FLORIDA, LLC

Current Principal Place of Business:

6152 DELANCEY STATION STREET
205
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

6152 DELANCEY STATION STREET
205
RIVERVIEW, FL 33569 US

New Mailing Address:

FEI Number: 20-2856376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LASMAN LAW FIRM, P.A.
6152 DELANCEY STATION STREET
205
RIVERVIEW, FL 33569 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: MGRM ( ) Delete
Name: LASMAN, JEFFREY M
Address: 6152 DELANCEY STATION STREET, SUITE 205
City-St-Zip: RIVERVIEW, FL 33569 US

Title: MGRM ( ) Delete
Name: ATKINS, WILLIAM R
Address: 6152 DELANCEY STATION STREET, SUITE 205
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LASMAN, JEFFREY M
Address: 6152 DELANCEY STATION STREET, SUITE 205A
City-St-Zip: RIVERVIEW, FL 33569 US

Title: MGRM (X) Change ( ) Addition
Name: ATKINS, WILLIAM R
Address: 6152 DELANCEY STATION STREET, SUITE 205A
City-St-Zip: RIVERVIEW, FL 33569

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: WILLIAM ATKINS MGRM 04/20/2006

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