

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000060413

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** SKYLINE TITLE AGENCY, LLC

**Current Principal Place of Business:**

1000 FIFTH STREET  
SUITE 209  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

1000 FIFTH STREET  
SUITE 200  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1000 FIFTH STREET  
SUITE 209  
MIAMI BEACH, FL 33139

**New Mailing Address:**

1000 FIFTH STREET  
SUITE 200  
MIAMI BEACH, FL 33139

**FEI Number:** 20-3013753

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DI SANTO LLP  
1000 FIFTH STREET  
SUITE 209  
MIAMI BEACH, FL 33139 US

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

DI SANTO, BETH A ESQ  
1000 FIFTH STREET  
SUITE 209  
MIAMI BEACH, FL 33139 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: BETH A DI SANTO ESQ

04/20/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DI SANTO, BETH A ESQ  
Address: 90 ALTON ROAD, UNIT 812  
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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: BETH A DI SANTO ESQ

MGRM

04/20/2010

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