2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Oct 27, 2008
Secretary of State

DOCUMENT# L05000076544

Entity Name: IN TOWN TITLE LLC

Current Principal Place of Business:

500 S. FT. KING ST. STE. A
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

6511 DARTMOUTH AVE N.
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 27-0128625 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRISON, MICKIE PRES.
6511 DARTMOUTH AVE N.
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

PRINCE, ADRIENNE C VP
6511 DARTMOUTH AVE N.
ST. PETERSBURG, FL 33710 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: ADRIENNE C PRINCE 10/27/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HARRISON, MATTIE L PRES.
Address: 6511 DARTMOUTH AVE N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGR ( ) Delete
Name: CARROLL, MARTHA VP
Address: 19153 CHERRY ROSE CIRCLE
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: HARRISON, MATTIE L PRES.
Address: 6511 DARTMOUTH AVE N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VP (X) Change ( ) Addition
Name: PRINCE, ADRIENNE C VP
Address: 6511 DARTMOUTH AVE N
City-St-Zip: ST. PETERSBURG, FL 33710

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: ADRIENNE PRINCE MGR 10/27/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date