

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076544

Entity Name: IN TOWN TITLE LLC

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

500 SE. FT. KING STREET
OCALA, FL 34471

Current Mailing Address:

6511 DARTMOUTH AVE N.
ST. PETERSBURG, FL 33710

New Mailing Address:

500 SE FT. KING STREET
OCALA, FL 34471

FEI Number: 27-0128625

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRINCE, ADRIENNE C VP
6511 DARTMOUTH AVE N.
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

PRINCE, ADRIENNE C
500 SE FT. KING STREET
OCALA, FL 34471 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

01/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: PRINCE, ADRIENNE C
Address: 500 SE FT. KING ST
City-St-Zip: Ocala, FL 33471

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

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 C PRINCE

PRES

01/06/2009

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