

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000084280

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** SOUTHEAST PROFESSIONAL TITLE, LLC

**Current Principal Place of Business:**

2699 LEE ROAD  
SUITE 120  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

2699 LEE ROAD  
SUITE 120  
WINTER PARK, FL 32789

**New Mailing Address:**

**FEI Number:** 20-3361204

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FARNELL, DEBORAH K  
2699 LEE ROAD  
SUITE 120  
ORLANDO, FL 32789 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: MS ( ) Delete  
Name: FARNELL, DEBORAH K  
Address: 1051 BLACK ACRE TRAIL  
City-St-Zip: WINTER SPRINGS, FL 32708

**ADDITIONS/CHANGES:**

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: DEBORAH K. FARNELL

MGR

01/20/2009

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