

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000088995

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** ASSET TITLE SERVICES, L.L.C.

**Current Principal Place of Business:**

15701 STATE RD. 50, SUITE 204  
CLERMONT, FL 34711

**New Principal Place of Business:**

15701 STATE RD. 50  
204  
CLERMONT, FL 34711

**Current Mailing Address:**

15701 STATE RD. 50, SUITE 204  
CLERMONT, FL 34711

**New Mailing Address:**

15701 STATE RD. 50  
204  
CLERMONT, FL 34711

**FEI Number:** 20-3389552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRISCOLL, ANGELA M  
928 BRIDGEWAY BLVD.  
ORLANDO, FL 32828 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  
**Name:** BRASHER, TAMMY L  
**Address:** 4440 HARTS COVE WAY  
**City-St-Zip:** CLERMONT, FL 34711

**Title:** MGRM  
**Name:** BRISCOLL, ANGELA M  
**Address:** 928 BRIDGEWAY BLVD  
**City-St-Zip:** ORLANDO, FL 32828

**Title:** MGRM  
**Name:** KALANGE, JOHN J  
**Address:** 1115 SALDIVAR RD  
**City-St-Zip:** THE VILLAGES, FL 32159

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:** TAMMY BRASHER

MGRM

02/16/2010

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