## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000095202

Entity Name: INVESTITLE, LLC

City-St-Zip: COLUMBIA, SC 29223

FILED Jul 06, 2006 Secretary of State

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
SUITE 502	HAVENUE 2 TON, FL 33432			
Current Mailing Address:		New Mailing Address:		
SUITE 502	HAVENUE 2 TON, FL 33432			
FEI Number In accordan	: FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the limited liability compa	FEI Number Not Applicable (X) ny did not receive the prior noti	Certificate of Status Desired ( ) ce.	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
55 NE 5TH SUITE 502	ELIZABETH HAVENUE 2 TON, FL 33432 US			
	e named entity submits this statement for the purple of Florida.	oose of changing its register	red office or registered agent, or both	
SIGNATUI	RE:			
	Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR ( ) Delete CAMILLERI, MICHAEL 55 NE 5TH AVENUE, SUITE 502 BOCA RATON, FL 33432	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR ( ) Delete TALIN, NORMAN 1555 PALM BEACH LAKES BLVD., SUITE 1510 WEST PALM BEACH, FL 33401	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGR ( ) Delete MUNSEY, JACKSON 405 EAST SPRINGS ROAD COLUMBIA, SC 29223	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	MGR () Delete MUNSEY, STEPHANIE 405 EAST SPRINGS ROAD	Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: MICHAEL CAMILLERI MGR. 07/06/2006