

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095202

FILED
Jan 15, 2007
Secretary of State

Entity Name: INVESTITLE, LLC

Current Principal Place of Business:

55 NE 5TH AVENUE
SUITE 502
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

55 NE 5TH AVENUE
SUITE 502
BOCA RATON, FL 33432

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, ELIZABETH
55 NE 5TH AVENUE
SUITE 502
BOCA RATON, FL 33432 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: MGR () Delete
Name: CAMILLERI, MICHAEL
Address: 55 NE 5TH AVENUE, SUITE 502
City-St-Zip: BOCA RATON, FL 33432

Title: MGR () Delete
Name: TALIN, NORMAN
Address: 1555 PALM BEACH LAKES BLVD., SUITE 1510
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR () Delete
Name: MUNSEY, JACKSON
Address: 405 EAST SPRINGS ROAD
City-St-Zip: COLUMBIA, SC 29223

Title: MGR () Delete
Name: MUNSEY, STEPHANIE
Address: 405 EAST SPRINGS ROAD
City-St-Zip: COLUMBIA, SC 29223

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: TAPLIN, NORMAN
Address: 1555 PALM BEACH LAKES BLVD., SUITE 1510
City-St-Zip: WEST PALM BEACH, FL 33401

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

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

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.

SIGNATURE: MICHAEL CAMILLERI

MGR

01/15/2007

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