

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098744

FILED
Jul 27, 2006
Secretary of State

Entity Name: FAMILY FIRST TITLE AND ESCROW, LLC

Current Principal Place of Business:

217 GOOLSBY BLVD
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

217 GOOLSBY BLVD
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BOKSA, JONATHAN J
3688 COCO LAKE DR
COCONUT CREEK, FL 33073 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KENNEDY-VALENCIA, CARRIE
Address: 15371 SW 51ST STREET
City-St-Zip: DAVIE, FL 33331 US

Title: MGR (X) Delete
Name: J & R FINANCIAL GROU, P, LLC
Address: 217 GOOLSBY BLVD
City-St-Zip: DEERFIELD BEACH, FL 33442 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: J & R FINANCIAL GROU, P, LLC
Address: 217 GOOLSBY BLVD
City-St-Zip: DEERFIELD BEACH, FL 33442 US

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: JONANTHAN J. BOKSA

MGR

07/27/2006

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