

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000100246

FILED
Nov 20, 2006
Secretary of State**Entity Name:** SOUTH POINT TITLE GROUP LLC**Current Principal Place of Business:**5190 NW 167 ST
STE 107
MIAMI, FL 33014**New Principal Place of Business:**1001 W CYPRESS CREEK RD
SUITE # 401
FORT LAUDERDALE, FL 33309 US**Current Mailing Address:**5190 NW 167 ST
STE 107
MIAMI, FL 33014**New Mailing Address:**1001 W CYPRESS CREEK RD
SUITE # 401
FORT LAUDERDALE, FL 33309 US**FEI Number:** 20-3626292**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CAGGIANO, ROBERT P
8613 NW 52 PLACE
CORAL SPRINGS, FL 33067 US**Name and Address of New Registered Agent:**WORLD CORPORATE SERVICES, INC.
2665 SOUTH BAYSHORE DRIVE
SUITE 703
MIAMI, FL 33133 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: ELENA DIAZ

11/20/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGRM () Delete
Name: CAGGIANO, ROBERT P
Address: 8613 NW 52 PLACE
City-St-Zip: CORAL SPRINGS, FL 33067Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VP () Change (X) Addition
Name: HAMPEL, OLAF B
Address: 8613 NW 52 PLACE
City-St-Zip: CORAL SPRINGS, FL 33067

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: OLAF B. HAMPEL

VP

11/20/2006

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