2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2006
Secretary of State

DOCUMENT# L05000107538

Entity Name: YIELD TITLE PARTNERS, LLC

Current Principal Place of Business:

4400 BAYOU BOULEVARD
SUITE 20
PENSACOLA, FL 32503

New Principal Place of Business:

7139 NORTH 9TH AVENUE
PENSACOLA, FL 32504

Current Mailing Address:

7360 BRYAN DAIRY ROAD
SUITE 200
LARGO, FL 33777

New Mailing Address:

140 FOUNTAIN PARKWAY
SUITE 210
ST. PETERSBURG, FL 33716

FEI Number: 20-3734532 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SECURITY FIRST TITLE AFFILIATES, INC.
7360 BRYAN DAIRY ROAD
SUITE 200
LARGO, FL 33777 US

Name and Address of New Registered Agent:

SECURITY FIRST TITLE AFFILIATES, INC.
140 FOUNTAIN PARKWAY
SUITE 210
ST. PETERSBURG, FL 33716 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: _____ 03/09/2006

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SECURITY FIRST TITLE, AFFILIATES, I N C.
Address: 7360 BRYAN DAIRY ROAD, SUITE 200
City-St-Zip: LARGO, FL 33777

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SECURITY FIRST TITLE, AFFILIATES, I N C.
Address: 140 FOUNTAIN PARKWAY, SUITE 210
City-St-Zip: ST. PETERSBURG, FL 33716

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: FRANK CAMPERLENGO PRES 03/09/2006

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