2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# L05000112875

Entity Name: SIGN HERE TITLE LLC

Current Principal Place of Business:

499 NORTH STATE ROAD 434
SUITE #1001
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

499 NORTH STATE ROAD 434
SUITE #1001
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 01-0850649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

PRICE-GONZALEZ, CAROLYN V
2106 BLUFF OAK STREET
APOPKA, FL 32712 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: PRICE-GONZALEZ, CAROLYN V
Address: 2106 BLUFF OAK STREET
City-St-Zip: APOPKA, FL 32712

Title: MGRM (X) Delete
Name: GONZALEZ, GEORGE L
Address: 2106 BLUFF OAK STREET
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: PRICE-GONZALEZ, CAROLYN V MGR
Address: 2106 BLUFF OAK STREET
City-St-Zip: APOPKA, FL 32712

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

I hereby certify that the information supplied with this filing does not qualify 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: CAROLYN V. PRICE-GONZALEZ MGR 05/01/2007

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