

# **2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000117273

**FILED**  
**Apr 20, 2007**  
**Secretary of State**

**Entity Name:** BUILDERS TITLE OF TAMPA BAY, LLC

**Current Principal Place of Business:**

510 EAST TARPON AVE.  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

3030 N. ROCKY POINT DR.  
SUITE 408  
TAMPA, FL 33607

**Current Mailing Address:**

510 EAST TARPON AVE.  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

3030 N. ROCKY POINT DR.  
SUITE 408  
TAMPA, FL 33607

**FEI Number:** 83-0441257

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATKINS, KRISTEN W  
510 EAST TARPON AVE.  
TARPON SPRINGS, FL 34689 US

**Name and Address of New Registered Agent:**

BROWN-EMERY, ESQ, BARBARA M  
3030 N. ROCKY POINT DR.  
SUITE 408  
TAMPA, FL 33607 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: BARBARA M. BROWN-EMERY, ESQ.

04/20/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: EMERY, BARBARA  
Address: 510 EAST TARPON AVE.  
City-St-Zip: TARPON SPRINGS, FL 34689

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: EMERY, BARBARA  
Address: 3030 N. ROCKY POINT DR., STE 408  
City-St-Zip: TAMPA, FL 33607

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: BARBARA M. EMERY

MGR

04/20/2007

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