2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122592

Entity Name: COMMERCIAL PROPERTY TITLE, LLC

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ONE INDEPENDENT DR., STE 1200 ONE INDEPENDENT DRIVE JACKSONVILLE, FL 32202

SUITE 1200

JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

ONE INDEPENDENT DRIVE ONE INDEPENDENT DR., STE 1200 SUITE 1200 JACKSONVILLE, FL 32202

JACKSONVILLE, FL 32202

FEI Number: 20-3992280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

INTREPID REGISTERED AGENT SERVICES, LLC CONTEGA BUSINESS SERVICES, LLC ONE INDEPENDENT DR., STE 1200 ONE INDEPENDENT DRIVE JACKSONVILLE, FL 32202 SUITE 1200

JACKSONVILLE, FL 32202 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: CHRISTIAN M. COX, VP 04/25/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: (X) Change () Addition () Delete INTREPID BUSINESS PA, RTNERS, LLC INTREPID BUSINESS PA, RTNERS, LLC Name: Name: Address: ONE INDEPENDENT DR., STE 1200 Address: ONE INDEPENDENT DRIVE, SUITE 1200

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

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: G. RAY DRIVER, JR. 04/25/2007