

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015490

FILED
Mar 06, 2007
Secretary of State

Entity Name: CAPRI TITLE OF FLORIDA, LLC

Current Principal Place of Business:

801 LAUREL OAK DRIVE, SUITE 705
NAPLES, FL 34108

New Principal Place of Business:

801 LAUREL OAK DRIVE, SUITE 705
NAPLES, FL 34108

Current Mailing Address:

801 LAUREL OAK DRIVE, SUITE 705
NAPLES, FL 34108

New Mailing Address:

801 LAUREL OAK DRIVE, SUITE 705
NAPLES, FL 34108

FEI Number: 20-4310134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: MILLER, CANFIELD, PA, DDOCK & STONE, P.L.C.
Address: 150 WEST JEFFERSON, SUITE 2500
City-St-Zip: DETROIT, MI 48226

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MILLER, CANFIELD, PA, DDOCK & STONE, P.L.C.
Address: 150 WEST JEFFERSON, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

Title: MGR () Change (X) Addition
Name: LINN, THOMAS W
Address: 150 WEST JEFFERSON, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

Title: MGR () Change (X) Addition
Name: POST, ROBERT A
Address: 150 WEST JEFFERSON, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

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: THOMAS W. LINN

MGR

03/06/2007

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