

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015490

FILED
Jan 26, 2010
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:

5551 RIDGEWOOD DRIVE
SUITE 101
NAPLES, FL 34108

Current Mailing Address:

801 LAUREL OAK DRIVE, SUITE 705
NAPLES, FL 34108

New Mailing Address:

5551 RIDGEWOOD DRIVE
SUITE 101
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
Name: MILLER, CANFIELD, PADDOCK & STONE, P.L.C.
Address: 150 WEST JEFFERSON, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

Title: MGR
Name: HARTMAN, MICHAEL W
Address: 150 WEST JEFFERSON, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

Title: MGR
Name: ROBSON, DAVID A
Address: 150 WEST JEFFERSON, SUITE 2500
City-St-Zip: DETROIT, MI 48226 US

Title: REP.
Name: LENNON, J. PATRICK
Address: 277 SOUTH ROSE ST, STE 5000
City-St-Zip: KALAMAZOO, MI 49007 US

I hereby 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: J. PATRICK LENNON

REP

01/26/2010

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