

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019801

FILED
Apr 16, 2009
Secretary of State

Entity Name: AT TITLE MANAGEMENT LLC

Current Principal Place of Business:

692 W. MONTROSE STREET, SUITE A
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

692 W. MONTROSE STREET, SUITE A
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 20-4346729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, WENDY
1147 GREENLEY AVE
GROVELAND, FL 34736 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: MORRIS, WENDY
Address: 1147 GREENLEY AVE
City-St-Zip: GROVELAND, FL 34736

Title: MGRM () Delete
Name: JANUARY, SHALICE
Address: 7846 SLOEWOOD DRIVE
City-St-Zip: MT. DORA, FL 32757

Title: MGRM () Delete
Name: ANGLES, JORDANA
Address: 1303 DICKENS AVE.
City-St-Zip: ORLANDO, FL 32809

Title: MGRM (X) Delete
Name: DELVALLE, MARVIN
Address: 647 FIRST CAPE CORAL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: JANUARY, SHALICE
Address: 95A KINGSTON ROAD
City-St-Zip: SCARBRO, WV 25917

Title: MGRM (X) Change () Addition
Name: ANGLES, JORDANA
Address: 1012 OFFSPREE COVE CIR
City-St-Zip: GROVELAND, FL 34736

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: SHALICE JANUARY

MGRM

04/16/2009

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