

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000036083

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** AGENTS BENCHMARK TITLE, LLC

**Current Principal Place of Business:**

715 S. ADOLPH PT  
LECANTO, FL 34461

**New Principal Place of Business:**

**Current Mailing Address:**

715 S. ADOLPH PT  
LECANTO, FL 34461

**New Mailing Address:**

**FEI Number:** 20-8846687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BENDER, SCOTT  
715 S. ADOLPH PT  
LECANTO, FL 34461 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:** MGR  
**Name:** BENDER, SCOTT  
**Address:** 715 S. ADOLPH PT  
**City-St-Zip:** LECANTO, FL 34461

**Title:** VP  
**Name:** GATLIN, TONI  
**Address:** 715 S. ADOLPH PT.  
**City-St-Zip:** LECANTO, FL 34461

**Title:** S  
**Name:** POSEY, LEWIS  
**Address:** 715 S. ADOLPH PT.  
**City-St-Zip:** LECANTO, FL 34461

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:** SCOTT BENDER

MGM

04/08/2010

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