

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036341

FILED
Feb 02, 2009
Secretary of State

Entity Name: INSURED TITLE AGENCY, L.L.C.

Current Principal Place of Business:

3030 NORTH ROCKY POINT DRIVE
SUITE 810
TAMPA, FL 33607

New Principal Place of Business:

5200 SEMINOLE BLVD
STE E
ST. PETERSBURG, FL 33708

Current Mailing Address:

3030 NORTH ROCKY POINT DRIVE
SUITE 810
TAMPA, FL 33607

New Mailing Address:

5200 SEMINOLE BLVD
STE E
ST. PETERSBURG, FL 33708

FEI Number: 20-4740964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAMARGO, TED
401 EAST JACKSON ST., SUITE 2400
TAMPA, FL 33602 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: MR. () Delete
Name: OVERSTREET, KEVIN J OWNER
Address: 3030 N. ROCKY POINT DR. STE. 230
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: OVERSTREET, KEVIN J OWNER
Address: 5200 SEMINOLE BLVD STE E
City-St-Zip: ST. PETERSBURG, FL 33708

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: KEVIN OVERSTREET

MR

02/02/2009

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