

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000053933

Entity Name: FLORIDA TITLESMTIH, LLC

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8240 EXCHANGE DRIVE, SUITE 5  
ORLANDO, FL 32809

**New Principal Place of Business:**

8240 EXCHANGE DRIVE  
SUITE C5  
ORLANDO, FL 32809

**Current Mailing Address:**

8240 EXCHANGE DRIVE, SUITE 5  
ORLANDO, FL 32809

**New Mailing Address:**

8240 EXCHANGE DRIVE  
SUITE C5  
ORLANDO, FL 32809

FEI Number: 20-4960438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SACHS, JOSHUA M  
7680 UNIVERSAL BLVD., SUITE 100  
ORLANDO, FL 32819 US

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

SACHS, JOSHUA M  
8240 EXCHANGE DRIVE  
SUITE C5  
ORLANDO, FL 32809 US

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: JOSHUA M SACHS

03/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SACHS, JOSHUA M  
Address: 8240 EXCHANGE DRIVE, SUITE C5  
City-St-Zip: ORLANDO, FL 32809

Title: MGRM  
Name: HENDERSON, JOHN T  
Address: 8240 EXCHANGE DRIVE, SUITE C5  
City-St-Zip: ORLANDO, FL 32809

Title: MGRM  
Name: HENDERSON, DANIEL S  
Address: 8240 EXCHANGE DRIVE, SUITE C5  
City-St-Zip: ORLANDO, FL 32809

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: JOSHUA M SACHS

MGRM

03/20/2012

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