2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000057059

Entity Name: PALM TITLE OF SW FLORIDA, LLC

FILED Jan 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4109 DE PRADO BOULEVARD 1251 TAYLOR LANE CAPE CORAL, FL 33904

UNIT 6C

LEHIGH ACRES, FL 33936

Current Mailing Address: New Mailing Address:

4109 DE PRADO BOULEVARD 4049 DEL PRADO BOULEVARD CAPE CORAL, FL 33904 CAPE CORAL, FL 33904

FEI Number: 36-4590231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KLOOTWYK, NACOLE KLOOTWYK, NACOLE 4049 DE PRÁDO BOULEVARD 4109 DE PRÁDO BOULEVARD CAPE CORAL, FL 33904 CAPE CORAL, FL 33904

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: NACOLE KLOOTWYK 01/22/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: (X) Change () Addition () Delete

EXECUTIVE TITLE INSU, RANCE SERVICES, INC. EXECUTIVE TITLE INSU, RANCE SERVICES, INC. Name: Name:

Address: 4109 DE PRADO BOULEVARD Address: 4049 DE PRADO BOULEVARD City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: NACOLE KLOOTWYK 01/22/2007