

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074583

FILED  
May 31, 2007  
Secretary of State

Entity Name: PALM BEACH ATLANTIC TITLE, LLC

**Current Principal Place of Business:**

777 S. FLAGLER DRIVE  
SUITE 800  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

777 S. FLAGLER DRIVE  
SUITE 800 WEST TOWER PHILLIPS POINT  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 20-5274677      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

SAUVOLA & ASSOCIATES, P.A.  
777 S. FLAGLER DRIVE  
SUITE 800 WEST TOWER -- PHILLIPS POINT  
WEST PALM BEACH, FL 33401 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SAUVOLA, NICOLE  
Address: 777 S. FLAGLER DRIVE, STE 800 WEST  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM ( ) Delete  
Name: DALIA, STEVEN R  
Address: 4580 PGA BLVD. SUITE 217  
City-St-Zip: PALM BEACH GARDENS, FL 33416

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: SMITH, WILLIAM A  
Address: 777 S. FLAGLER DRIVE, SUITE 800 WEST  
City-St-Zip: WEST PALM BEACH, FL 33401

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: NICOLE SAUVOLA

MGRM

05/31/2007

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