2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000098471

Entity Name: AMERICA'S TITLE CHOICE, LLC

FILED Aug 15, 2007 Secretary of State

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

5450 W HILLSBORO BLVD 2001 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33407 US STE 2

COCONUT CREEK, FL 33073

New Mailing Address: Current Mailing Address:

2001 PALM BEACH LAKES BLVD 5450 W HILLSBORO BLVD STE 2 WEST PALM BEACH, FL 33407 US

COCONUT CREEK, FL 33073

FFI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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:

SHTRAX, DAVID P 12611 NW 17 PLACE

CORAL SPRINGS, FL 33071 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:

Date

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: HOFFMAN DAVID Name: Address: 1658 E. SHANGRILA DRIVE Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip:

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

Name: SHTRAX, DAVID P Name: SHTRAX, DAVID P Address: 12611 NW 17TH PLACE Address: 12611 NW 17TH PLACE City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33071 US

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

HOFFMAN, WILLIAM Name: Name: 1658 E. SHANGRI LA DR. Address: Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip:

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: DAVID SHTRAX 08/15/2007