

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101770

Entity Name: CLEMATIS TITLE LLC

FILED
Feb 13, 2007
Secretary of State

Current Principal Place of Business:

301 CLEMATIS STREET
202
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

301 CLEMATIS STREET
202
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 56-2619278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORIO LAND, YVES
301 CLEMATIS STREET
202
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

CORIO LAND, YVES S
301 CLEMATIS STREET
202
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: YVES SAINTFORT CORIO LAND

02/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CORIO LAND, YVES
Address: 4155 MEADE WAY
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGR () Delete
Name: CORIO LAND, SILORT
Address: 4155 MEADE WAY
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CORIO LAND, YVES S
Address: 4155 MEADE WAY
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGRM (X) Change () Addition
Name: CORIO LAND, SILORT
Address: 4155 MEADE WAY
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the 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: YVES SAINTFORT CORIO LAND

MGRM

02/13/2007

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