

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002599

FILED
Aug 28, 2008
Secretary of State

Entity Name: FASTTITLELIEN, LLC

Current Principal Place of Business:

221 N. HOGAN STREET
#152
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

221 N. HOGAN STREET
#152
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 71-1019565 FEI Number Applied For () 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:

WILKINS, TERRY
221 N. HOGAN STREET
JACKSONVILLE, FL FL 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: ALAN DAILEY,
Address: 221 N. HOGAN STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGRM () Delete
Name: LAWRENCE, CARMEN
Address: 221 N. HOGAN STREET, #152
City-St-Zip: JACKSONVILLE, FL 32202

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: DAILEY, JAHMAL
Address: 221 NORTH HOGAN STREET
City-St-Zip: JACKSONVILLE, FL 32202

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: ALAN DAILEY

CLO

08/28/2008

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