

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000042567

FILED
Sep 01, 2009
Secretary of State

Entity Name: MCCLUSKEY TITLE SERVICES, LLC

Current Principal Place of Business:

400 ST. ANDREWS BOULEVARD
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

400 ST. ANDREWS BOULEVARD
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 20-8899668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLUSKEY, BETTY S
400 ST. ANDREWS BOULEVARD
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: MCCLUSKY, BETTY
Address: 400 ST. ANDREWS BOULEVARD
City-St-Zip: MELBOURNE, FL 32940

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCCLUSKY, BETTY S PD
Address: 400 ST. ANDREWS BOULEVARD
City-St-Zip: MELBOURNE, FL 32940 US

Title: VP () Change (X) Addition
Name: WALKER, PATRICIA N VPD
Address: 400 ST ANDREWS BOULEVARD
City-St-Zip: MELBOURNE, FL 32940 US

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: BETTY S. MCCLUSKEY

PD

09/01/2009

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