

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000077044

FILED
Jan 03, 2008
Secretary of State

Entity Name: GATEWAY TITLE & ESCROW GROUP LLC

Current Principal Place of Business:

2009 LONGWOOD LAKE MARY ROAD
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

2009 LONGWOOD LAKE MARY ROAD
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 26-0598617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERSSON, CHRISTOPHER
2009 LONGWOOD LAKE MARY ROAD
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

ERSSON, CHRISTOPHER G
144 BRUSHCREEK DRIVE
SANFORD, FL 32771 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: CHRISTOPHER ERSSON

01/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ERSSON, CHRISTOPHER
Address: 144 BRUSHCREEK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: REGISTER, SUSAN
Address: 2641 SALTERS COURT
City-St-Zip: DELTONA, FL 32738 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ERSSON, CHRISTOPHER G
Address: 144 BRUSHCREEK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM (X) Change () Addition
Name: REGISTER, SUSAN R
Address: 2641 SALTERS COURT
City-St-Zip: DELTONA, FL 32738 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: CHRISTOPHER ERSSON

MGMR

01/03/2008

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