2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2008
Secretary of State

DOCUMENT# L07000119851

Entity Name: ALL SURE TITLE INSURANCE, LLC

Current Principal Place of Business:

3136 3RD AVENUE NORTH
ST. PETERSBURG, FL 33713 US

New Principal Place of Business:

3138 3RD AVENUE NORTH
ST. PETERSBURG, FL 33713 US

Current Mailing Address:

3136 3RD AVENUE NORTH
ST. PETERSBURG, FL 33713 US

New Mailing Address:

3138 3RD AVENUE NORTH
ST. PETERSBURG, FL 33713 US

FEI Number: 26-1495753 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RODRIGUEZ, MICHAEL E
3136 3RD AVENUE NORTH
ST. PETERSBURG, FL 33713 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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: D, P ( ) Change (X) Addition
Name: CULPEPPER, DONALD D
Address: 3138 3RD AVENUE N
City-St-Zip: ST. PETERSBURG, FL 33713

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: DONALD D. CULPEPPER D, P 03/13/2008

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