

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000020635

**FILED**  
**Jun 03, 2009**  
**Secretary of State**

**Entity Name:** SAFEGUARD TITLE SERVICES "LLC"

**Current Principal Place of Business:**

6940 W. LINEBAUGH AVENUE, STE. 101  
TAMPA, FL 33625

**New Principal Place of Business:**

6940 W. LINEBAUGH AVENUE, STE. 102  
TAMPA, FL 33625

**Current Mailing Address:**

6940 W. LINEBAUGH AVENUE, STE. 101  
TAMPA, FL 33625

**New Mailing Address:**

6940 W. LINEBAUGH AVENUE, STE. 102  
TAMPA, FL 33625

FEI Number: 26-2029505      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:**

KETTERING, CHAD  
6940 W. LINEBAUGH AVENUE, STE. 102B  
TAMPA, FL 33625      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: KETTERING, CHAD  
Address: 6711 FRONTIER LANE  
City-St-Zip: TAMPA, FL 33625

Title: MGRM      ( ) Delete  
Name: MANIACI, ERIC  
Address: 10396 CARROLLWOOD LANE, STE. 27  
City-St-Zip: TAMPA, FL 33618

**ADDITIONS/CHANGES:**

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

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

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: CHAD KETTERING

MGR

06/03/2009

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