

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000107182

FILED
Apr 14, 2009
Secretary of State

Entity Name: ALLY PARKER BROWN TITLE INSURANCE AGENCY, LLC.

Current Principal Place of Business:

800 SW SQUIRREL AVE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

698 SW PORT ST. LUCIE BLVD., #104
PORT ST. LUCIE, FL 34953

Current Mailing Address:

800 SW SQUIRREL AVE
PORT ST. LUCIE, FL 34953

New Mailing Address:

698 SW PORT ST. LUCIE BLVD., #104
PORT ST. LUCIE, FL 34953

FEI Number: 26-3738274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREASEN, ALLAN
3925 MOORES LAKE ROAD
DOVER, FL 33527 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: BROWN, ARLENE B
Address: 800 SW SQUIRREL AVE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGRM () Delete
Name: ALLY, DIANE L
Address: 3611 SE LEONARD LN.
City-St-Zip: STUART, FL 34997

Title: MGRM () Delete
Name: PARKER, MERRILL
Address: 2301 SW INDEPENDENCE RD.
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES:

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

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: MERRILL PARKER

MGRM

04/14/2009

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