

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000090174

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** TLC NATIONAL TITLE COMPANY, LLC

**Current Principal Place of Business:**

4801 S. UNIVERISTY DRIVE  
SUITE 136  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

4801 S. UNIVERISTY DRIVE  
SUITE 136  
DAVIE, FL 33328

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

HAGAN, FRANK J JR  
4801 S. UNIVERSITY DRIVE  
SUITE 136  
DAVIE, FL 33328 US

**Name and Address of New Registered Agent:**

SAXTON, CAROL J  
4801 S. UNIVERSITY DRIVE  
SUITE 136  
DAVIE, FL 33328 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: CAROL J. SAXTON

04/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SAXTON, CAROL J  
Address: 4801 S. UNIVERSITY DRIVE #136  
City-St-Zip: DAVIE, FL 33328

I hereby 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: CAROL J. SAXTON

MGRM

04/10/2012

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