2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2012
Secretary of State

DOCUMENT# L11000129415

Entity Name: NATIONAL TITLE INSURANCE ACADEMY LLC

Current Principal Place of Business:

8520 49TH STREET NORTH
PMB-250
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

8520 49TH STREET NORTH
PMB-250
PINELLAS PARK, FL 33781

New Mailing Address:

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

Name and Address of Current Registered Agent:

KOOGLER, KAREN E
8520 49TH STREET NORTH
PMB-250
PINELLAS PARK, FL 33781 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: MGRM
Name: KOOGLER, KAREN E
Address: 8520 49TH STREET NORTH, PMB-250
City-St-Zip: PINELLAS PARK, FL 33781

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 Statues.

SIGNATURE: KAREN E. KOOGLER MGRM 03/13/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date