

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 MAR -9 AM 10: 25

**FILING FEE \$ 188.75** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT # L9700000807**

GUARANTEED TITLE COMPANY L.C.  
1711 WORTHINGTON RD #202  
WEST PALM BEACH FL 33409

1a. Principal Place of Business Address

1711 WORTHINGTON RD #202  
WEST PALM BEACH FL 33409

2. Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07/28/1997

FL

City & State

City & State

4. FEI Number

Applied For

65-0786407

Not Applicable

Zip

Country

Zip

Country

5. Date of Last Report  
04/24/1998

6. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

MIRKIN & WOOLF, P.A.  
1700 PALM BEACH LAKES BLVD #580  
WEST PALM BEACH FL 33401

8. Name and Address of New Registered Agent/Office

Name: **James F. Miller**  
Street Address (P.O. Box Number is Not Acceptable): **1711 Worthington Road**  
Suite, Apt. #, etc.: **Suite 202**  
City, State and Zip Code: **West Palm Beach FL 33409**

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR

~~JANE DEVER~~  
~~PIERCE, THOMAS K~~

1711 WORTHINGTON RD #202

WEST PALM BEACH FL

MGR

MILLER, JAMES F

1711 WORTHINGTON RD #202

WEST PALM BEACH FL

MGR

COURTNEY, KATHY

~~1711 WORTHINGTON RD #202~~  
**11924 W. FOREST HILL BLVD.**

WEST PALM BEACH FL  
**33411**

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03/10/99--01060--007  
\*\*\*188.75 \*\*\*188.75

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TITLE OF LIMITED LIABILITY COMPANY (PRINT NAME OF OFFICER, MANAGER, TRUSTEE, RECEIVER, OR OTHER AUTHORIZED PERSON)

Date

Business Hours