

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L98000000269

1. Entity Name

ASSOCIATED FINANCIAL TITLE AGENCY, L.C.



Principal Place of Business

1002 W. 23RD ST. SUITE 400
PANAMA CITY, FL 32405

Mailing Address

1002 W. 23RD ST. SUITE 400
PANAMA CITY, FL 32405

DO NOT WRITE IN THIS SPACE



04102008No Chg-LLC

CR2E083 (12/07)

4. FEI Number

59-3495912

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIPPIN, LAURETTA J
1002 W. 23RD STREET, SUITE 400
PANAMA CITY, FL 32405

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	CHAPMAN, KRISTIAN B
STREET ADDRESS	1002 W. 23RD STREET, SUITE 400
CITY - ST - ZIP	PANAMA CITY, FL 32405
TITLE	S
NAME	PIPPIN, LAURETTA J
STREET ADDRESS	1002 W. 23RD ST., SUITE 400
CITY - ST - ZIP	PANAMA CITY, FL 32405
TITLE	MGR
NAME	HENRY, ROBERT F III
STREET ADDRESS	1002 WEST 23RD ST SUITE 400
CITY - ST - ZIP	PANAMA CITY, FL 32405
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000941862
05/28/08-80121-025 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE:

Lauretta J. Pippin, Secretary

4/10/08

(850) 769-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #