2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/1

FILED
May 29, 2007 8:00 am
Secretary of State
05-01-2007 90322 025 ****50.00

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1. Entity Name
GREATER FLORIDA TITLE COMPANY II, L.L.C.

Principal Place of Business	Mailing Address
8680 COMMODITY CR SUITE 200A ORLANDO, FL 32819	8680 COMMODITY CR SUITE 200A ORLANDO, FL 32819

DO NOT WRITE IN THIS SPACE

01102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
59-3687746
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KORSHAK, STEPHEN D
8680 COMMODITY CR
SUITE 200A
ORLANDO, FL 32819

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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, the position(s) set forth above.

SIGNATURE: Stephen D. Korshak 4/30/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	KORSHAK, STEPHEN D
STREET ADDRESS	8680 COMMODITY CR SUITE 200A
CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Stephen D. Korshak 5/25/07 407-345-0080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Stephen D. Korshak