## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M01000002424

Entity Name: AMERICAN HOME TITLE, L.C.

FILED Jan 12, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

7550 LUCERNE DR., STE. 205 2151 MICHELSON DR., STE. 295 MIDDLEBURG HEIGHTS, OH 44130 MIDDLEBURG HEIGHTS, OH 44131

**Current Mailing Address: New Mailing Address:** 

7550 LUCERNE DR., STE. 205 2151 MICHELSON DR., STE. 295 MIDDLEBURG HEIGHTS, OH 44130 IRVINE, CA 92612

FEI Number: 34-1892772 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STIVERS, H.B. 245 E. VIRGINIA ST. TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS:**

**ADDITIONS/CHANGES:** 

( ) Delete (X) Change ( ) Addition IACOBELLI, DEANA M Name: Name: IACOBELLI, DEANA M Address: 7550 LUCERNE DR., STE. 205 Address: 2151 MICHELSON DR., STE. 295

City-St-Zip: MIDDLEBURG HEIGHTS, OH 44130 City-St-Zip: IRVINE, CA 92612

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: DEANA M IACOBELLI 01/12/2004