

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000249

FILED
Apr 29, 2009
Secretary of State

Entity Name: CAPSTONE TITLE PARTNERS, L.L.C.

Current Principal Place of Business:

888 S ANDREWS AVE
STE 204
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

888 S ANDREWS AVE
STE 204
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 80-0030225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUTTER, C. CHRISTIAN ESQ.
2900 EAST OAKLAND PARK BLVD., STE. 200
FORT LAUDERDALE, FL 33306 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 () Delete
Name: SAUTTER, C. CHRISTIAN ESQ.
Address: 2900 EAST OAKLAND PARK BLVD., STE. 200
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: MGRM () Delete
Name: COON, THOMAS T JR ESQ
Address: 888 SOUTH ANDREWS AVE., STE. 201-A
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: THOMAS T COON JR

MGRM

04/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date