

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000000249

**FILED**  
**Apr 29, 2011**  
**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.  
2850 NORTH ANDREWS AVENUE  
FORT LAUDERDALE, FL 33311 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  
**Name:** SAUTTER, C. CHRISTIAN ESQ.  
**Address:** 2850 N ANDREWS AVENUE  
**City-St-Zip:** FORT LAUDERDALE, FL 33311

**Title:** MGRM  
**Name:** COON, THOMAS T JR ESQ  
**Address:** 888 SOUTH ANDREWS AVE., STE. 204  
**City-St-Zip:** FORT LAUDERDALE, FL 33316

I hereby 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:** C. CHRISTIAN SAUTTER, ESQ.

MGRM

04/29/2011

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