2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000304

Entity Name: REAL ESTATE TITLE SERVICES, LLC

FILED Jan 31, 2005 Secretary of State

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

9721 ORMSBY STATION RD 9721 ORMSBY STATION RD LOUISVILLE, KY 40223

SUITE 105

LOUISVILLE, KY 40223

Current Mailing Address: New Mailing Address:

9721 ORMSBY STATION RD 9721 ORMSBY STATION RD LOUISVILLE, KY 40223 SUITE 105

LOUISVILLE, KY 40223

FEI Number: 62-1855058 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:

CROIZAT, PETER LEVINE, MARK S

3402 WEST CYPRESS STREET, SUITE 400 245 EAST VIRGINIA STREET TAMPA, FL 33607 TALLAHASSEE, FL 32301

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: MARK S. LEVINE 01/31/2005

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete

FREIBERT, SHAWN R Name: Name: Address: 161 ST. MATTHEWS AVE. Address: City-St-Zip: LOUISVILLE, KY 40207 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name: MOOSER, CHRIS J Name: Address: 161 ST. MATTHEWS AVE. Address: City-St-Zip: LOUISVILLE, KY 40207 City-St-Zip:

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: SHAWN R. FREIBERT 01/31/2005