

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000688

Entity Name: PATRIOT TITLE, LLC

FILED  
Jul 05, 2005  
Secretary of State

## Current Principal Place of Business:

1777 REISTERSTOWN RD.  
BALTIMORE, MD 21208

## New Principal Place of Business:

1777 REISTERSTOWN RD.  
SUITE 375 B  
BALTIMORE, MD 21208

## Current Mailing Address:

1777 REISTERSTOWN RD.  
BALTIMORE, MD 21208

## New Mailing Address:

1777 REISTERSTOWN RD.  
SUITE 375 B  
BALTIMORE, MD 21208

FEI Number: 52-2345915      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

MOGERMAN, RICHARD M  
150 SOUTH PINE ISLAND ROAD, STE. 130  
PLANTATION, FL 33324 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: BERGER, MATT  
Address: 1777 REISTERSTOWN RD.  
City-St-Zip: BALTIMORE, MD 21208

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BERGER, MATTHEW L  
Address: 1777 REISTERSTOWN RD. SUITE 375 B  
City-St-Zip: BALTIMORE, MD 21208

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: MATTHEW L. BERGER

MGRM

07/05/2005

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