

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002730

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: REGENCY TITLE COMPANY, L.L.C.

**Current Principal Place of Business:**

3001 LEADENHALL ROAD  
MOUNT LAUREL, NJ 08054

**New Principal Place of Business:**

**Current Mailing Address:**

1 CAMPUS DRIVE  
PARSIPPANY, NJ 07054

**New Mailing Address:**

FEI Number: 58-2592294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STIVERS, H B  
245 EAST VIRGINIA STREET  
TALLAHASSEE, FL 32301 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: D ( ) Delete  
Name: BURNS, JEANETTE  
Address: 3001 LEADENHALL ROAD  
City-St-Zip: MOUNT LAUREL, NJ 08054

Title: D ( ) Delete  
Name: KOZEL, JAMES P  
Address: 3001 LEADENHALL ROAD  
City-St-Zip: MOUNT LAUREL, NJ 08054

Title: D ( ) Delete  
Name: SCHMIDT, JAMES M  
Address: 3001 LEADENHALL ROAD  
City-St-Zip: MOUNT LAUREL, NJ 08054

Title: MGR ( ) Delete  
Name: GULLEY, NEIL  
Address: 308 ROUTE 38  
City-St-Zip: MOORESTOWN, NJ 08057

**ADDITIONS/CHANGES:**

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

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

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 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: NEIL GULLEY

MGR

04/28/2006

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