

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 29, 2005 08:00 AM
Secretary of State

DOCUMENT # M04000003840

1. Entity Name
REPUBLIC COMMERCIAL TITLE AGENCY, LLC



Principal Place of Business

6111 PEACHTREE DUNWOODY ROAD BLDG D
ATLANTA, GA 30328

Mailing Address

6111 PEACHTREE DUNWOODY ROAD BLDG D
ATLANTA, GA 30328



07192005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

58-2651213

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE _____

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MORRIS, ARTHUR J 2781 WINDY RIDGE PARKWAY ATLANTA, GA 30339
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCHNEIDER, RANDOLPH H 2781 WINDY RIDGE PARKWAY ATLANTA, GA 30339
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KALA, J GREGORY 6111 PEACHTREE DUNWOODY ROAD BLDG D ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEISS, ANDREW M 6111 PEACHTREE DUNWOODY ROAD BLDG D ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/29/05-80003-002 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

RANDOLPH H. SCHNEIDER

Date

7/19/05

Daytime Phone #

678 298 2100