2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000002022

Entity Name

PRECISION TITLE SERVICES, LLC



FILED Feb 27, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

635 PARK MEADOW RD., SUITE 101 WESTERVILLE, OH 43081 635 PARK MEADOW RD., SUITE 101 WESTERVILLE, OH 43081



01052006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
54-206399 <u>6</u>		Not Applicable
5. Certificate of Status Desired		0 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BAKER, MEREDITH S 350 BEACH RD., APT. 203 TEQUESTA, FL 33469

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the purpose of cha tions of registered agent.	anging its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and Pite if applicable	(NOTE Registered Agent signature required when reinstaling)	DATE
	digit actie, typed or printed matte diregistered agent and the in appricable	(NOTE TRESISE OUT GET TENDER OF THE TRESISE IS ASSETTED.	On C
9.	iling Fee is \$50.00 lue by May 1, 2006 MANAGING MEMBERS/MANAGERS		
TITLE NAME	MGRM SAMMONS, JEFFERY D		
STREET ADDRESS			
CITY-ST-ZIP	WESTERVILLE, OH 43081		
TITLE			
NAME			ECONOMIC NAMED OF STREET
STREET ADDRESS			H00000447354

DO NOT WRITE IN THIS SPACE

CITY - ST-ZIP TITLE NAME STREET ADDRESS CHTY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on the 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 regeiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Date

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