

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # M05000005098

1. Entity Name
NETFIRST TITLE SERVICES, LLC



Principal Place of Business
**2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331**

Mailing Address
**2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331**

DO NOT WRITE IN THIS SPACE



03262007No Chg-LLC

CR2E083 (11/05)

4. FEI Number
33-1124767

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331**

**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

Lisa Reeves

Lisa Reeves, Assistant Secretary

(NOTE: Registered Agent signature required when reinstating)

3/26/07

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000687572
04/10/07-80043-023 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR AEA INVESTMENTS, LLC 39 S. LASALLE, SUITE 620 (JOHN BAUMGART) CHICAGO, IL 60603
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FIRST UNITED MORTGAGE II, INC. 111 NORTH ORANGE AVE, STE 750 GREGOR GRAEF ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 606, Florida Statutes.

SIGNATURE:

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

03-27-07

Date

(636) 925-8640

Daytime Phone #