

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000005233

Entity Name: GINN TITLE SERVICES, LLC

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1 HAMMOCK BEACH PARKWAY  
2ND FLOOR - LEGAL DEPT.  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

1 HAMMOCK BEACH PARKWAY  
2ND FLOOR - LEGAL DEPT.  
PALM COAST, FL 32137

**New Mailing Address:**

FEI Number: 20-3468414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRAY, JOHN  
1 HAMMOCK BEACH PARKWAY  
2ND FLOOR - LEGAL DEPT.  
PALM COAST, FL 32137 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: VP  
Name: WILDE, AMY  
Address: 1 HAMMOCK BEACH PARKWAY, 2ND FLOOR  
City-St-Zip: PALM COAST, FL 32137

I hereby 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: AMY WILDE

VP

03/22/2011

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