

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006622

FILED
Apr 29, 2008
Secretary of State

Entity Name: NORTH AMERICAN SERVICES, LLC

Current Principal Place of Business:

2185 N CALIFORNIA BLVD STE 575
WALNUT CREEK, CA 94596

New Principal Place of Business:

1855 GATEWAY BOULEVARD
SUITE 600
CONCORD, CA 94520

Current Mailing Address:

2185 N CALIFORNIA BLVD STE 575
WALNUT CREEK, CA 94596

New Mailing Address:

1855 GATEWAY BOULEVARD
SUITE 600
CONCORD, CA 94520

FEI Number: 56-2523130

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR () Delete
Name: NORTH AMERICAN TITLE, INSURANCE COM P ANY
Address: 2185 N CALIFORNIA BLVD STE 575
City-St-Zip: WALNUT CREEK, CA 94596

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NORTH AMERICAN TITLE, INSURANCE COM P ANY
Address: 1855 GATEWAY BLVD., SUITE 600
City-St-Zip: CONCORD, CA 94520

I hereby certify that the information supplied with this filing does not qualify 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: JEFFREY P. BROWN

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04/29/2008

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