

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004679

Entity Name: CLEAR TITLE, LLC

FILED
Aug 28, 2007
Secretary of State

Current Principal Place of Business:

525 SOUTH SCHOOL AVENUE, SUITE 110
FAYETTEVILLE, AR 727015976

New Principal Place of Business:

1401 SE WALTON BLVD, SUITE 109
BENTONVILLE, AR 72712

Current Mailing Address:

525 SOUTH SCHOOL AVENUE, SUITE 110
FAYETTEVILLE, AR 727015976

New Mailing Address:

1401 SE WALTON BLVD, SUITE 109
BENTONVILLE, AR 72712

FEI Number: 20-1447705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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: PATTERSON, JAMES B
Address: 525 SOUTH SCHOOL AVENUE, SUITE 110
City-St-Zip: FAYETTEVILLE, AR 727015976

Title: MGR () Delete
Name: PATTERSON, SHERYL L
Address: 525 SOUTH SCHOOL AVENUE, SUITE 110
City-St-Zip: FAYETTEVILLE, AR 727015976

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PATTERSON, JAMES B
Address: 1401 SE WALTON BLVD
City-St-Zip: BENTONVILLE, AR 72712

Title: MGR (X) Change () Addition
Name: PATTERSON, SHERYL L
Address: 1401 SE WALTON BLVD
City-St-Zip: BENTONVILLE, AR 72712

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: LINDA OLETTI

MS.

08/28/2007

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