

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000081528

**Entity Name:** OMEGA TITLE FLORIDA LLC

**Current Principal Place of Business:**

1415 DEAN STREET  
SUITE 115  
FORT MYERS, FL 33901

**Current Mailing Address:**

1415 DEAN STREET  
SUITE 115  
FORT MYERS, FL 33901 US

**FEI Number:** 30-0766591

**Certificate of Status Desired:** No

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

OMEGA TITLE LLC  
1415 DEAN STREET  
SUITE 115  
FORT MYERS, FL 33901 US

*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:** SCOTT DASCANI

04/26/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MALINGUAGGIO, KATHERINE  
Address 1415 DEAN STREET  
SUITE 115  
City-State-Zip: FORT MYERS FL 33901

Title MGRM  
Name OMEGA TITLE LLC  
Address POST OFFICE BOX 2306  
City-State-Zip: FORT MYERS FL 33902

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SCOTT DASCANI

CEO

04/26/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date