

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000432121

**Entity Name:** TRUSTED PARTNER TITLE, LLC

**Current Principal Place of Business:**

600 LEE STREET  
WILDWOOD, FL 34785

**Current Mailing Address:**

600 LEE STREET  
WILDWOOD, FL 34785

**FEI Number:** 33-1614593

**Certificate of Status Desired:** Yes

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

BEATTY, JEFFREY K  
10156 LAKE MIONA WAY  
OXFORD, FL 34484 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            BEATTY, JEFFREY K  
Address        10156 LAKE MIONA WAY  
City-State-Zip: OXFORD FL 34484

*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:** JEFFREY K BEATTY

AMBR

02/11/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date