

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 259960

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: COLUMBIA TITLE OF FLORIDA INC

**Current Principal Place of Business:**

666 GRAND AVE. #2900  
DES MOINES, IA 503030657

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 657  
DES MOINES, IA 503030657

**New Mailing Address:**

FEI Number: 59-1004119      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: CAPUA, MARISA P  
Address: 1360 S DIXIE HWY  
City-St-Zip: CORAL GABLES, FL 33146

Title: CEO ( ) Delete  
Name: SHUFFIELD, RONALD A  
Address: 1360 S DIXIE HWY  
City-St-Zip: CORAL GABLES, FL 33146

Title: DIR ( ) Delete  
Name: MOLINE, ROBERT  
Address: 333 SOUTH 7TH ST. #2700  
City-St-Zip: MINNEAPOLIS, MN 55402

Title: DIR ( ) Delete  
Name: PELTIER, RONALD  
Address: 333 SOUTY 7TH ST., #2700  
City-St-Zip: MINNEAPOLIS, MN 55402

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: STRANDMO, DANA D  
Address: 333 SOUTH 7TH STREET, SUITE 2700  
City-St-Zip: MINNEAPOLIS, MN 55402

Title: AS ( ) Change (X) Addition  
Name: LEIGHTON, PAUL J  
Address: 666 GRAND AVENUE  
City-St-Zip: DES MOINES, IA 50309

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL J. LEIGHTON

AS

03/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date