

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 380700

FILED
Feb 17, 2011
Secretary of State

Entity Name: PROFESSIONAL TITLE INSURANCE AGENCY, INC.

Current Principal Place of Business:

3067 E COMMERCIAL BLVD
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

3067 E COMMERCIAL BLVD
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-1366993 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERS, DENNIS F
3067 E COMMERCIAL BLVD
FORT LAUDERDALE, FL 33308 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

OFFICERS AND DIRECTORS:

Title: PD
Name: PETERS, DENNIS F
Address: 3067 E COMMERCIAL BLVD
City-St-Zip: FT LAUDERDALE, FL 33308

Title: STD
Name: MAGER, MARTHA L
Address: 3067 E. COMMERCIAL BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: VPD
Name: BABBITT, CATHARINE L
Address: 3067 E COMMERCIAL BLVD
City-St-Zip: FT. LAUDERDALE, FL 33308

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 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 all other like empowered.

SIGNATURE: DENNIS F. PETERS

PD

02/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date