

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000083646

**FILED**  
**Jul 17, 2007**  
**Secretary of State**

**Entity Name:** TITLE SOLUTIONS CLOSING SERVICES, INC.

**Current Principal Place of Business:**

5189 MARINER BLVD  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

5189 MARINER BLVD  
SPRING HILL, FL 34609

**New Mailing Address:**

**FEI Number:** 34-1997166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: DP ( ) Delete  
Name: JONES, JUDITH A  
Address: 2183 TORREY PINES CT  
City-St-Zip: SPRING HILL, FL 34606

Title: PRES ( ) Delete  
Name: JONES, JUDITH A  
Address: 2183 TORREY PINES CT  
City-St-Zip: SPRING HILL, FL 34606

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

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

Title: DIR (X) Change ( ) Addition  
Name: SUDNIK, DANIEL P  
Address: 18916 BASCOMB LANE  
City-St-Zip: HUDSON, FL 34667

Title: DIR (X) Change ( ) Addition  
Name: FINGERMAN, VYACHESLAV  
Address: 18728 BASCOMB LANE  
City-St-Zip: HUDSON, FL 34667

Title: MGR ( ) Change (X) Addition  
Name: LAMP, AMALIA  
Address: 5189 MARINER BLVD  
City-St-Zip: SPRING HILL, FL 34609

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:** VYACHESLAV FINGERMAN

DIR

07/17/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date