## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000026693

Entity Name: TAMIAMI TITLE INSURANCE AGENCY INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
822 ANCH NAPLES, I	IOR RODE DF FL 34103	RIVE			
Current Mailing Address:			New Mailing Addres	s:	
822 ANCH NAPLES, I	IOR RODE DE FL 34103	RIVE			
FEI Number:	: 20-2357422	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: N			Name and Address of	of New Registered Agent:	
HOUCHIN 822 ANCH NAPLES, I	OR RODE DE				
The above in the State	named entity of Florida.	submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P,S ( ) HOUCHIN, ANN 822 ANCHOR F NAPLES, FL 3	RODE DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V,T ( KREPEL, BEVE 822 ANCHOR F NAPLES, FL 3	RODE DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: BEVERLY J KREPEL VP 04/25/2008