

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000142562

FILED
May 25, 2006
Secretary of State

Entity Name: SETTLEMENT TITLE SERVICES, INC.

Current Principal Place of Business:

3439 SW 171 TERRACE
MIRAMAR, FL 33022

New Principal Place of Business:

Current Mailing Address:

3439 SW 171 TERRACE
MIRAMAR, FL 33022

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, RICHARD
900 NW 141ST AVE.
#101
PEMBROKE PINES, FL 33028 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIMON, RICHARD
Address: 900 NW 141ST AVE., #101
City-St-Zip: PEMBROKE PINES, FL 33028

Title: V () Delete
Name: LAWSON, JASON
Address: 3439 SW 171 TERRACE
City-St-Zip: MIRAMAR, FL 33022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON LAWSON

VP

05/25/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date