

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000073830

FILED
Jan 21, 2009
Secretary of State

Entity Name: FIRST NATIONAL TITLE & INSURANCE SERVICES, INC.

Current Principal Place of Business:

9130 S. DADELAND BLVD
1613
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9130 S. DADELAND BLVD.
1901
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0944119 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, SONJA
9130 S. DADELAND BLVD.
1613
MIAMI, FL 33156 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: P () Delete
Name: RODRIGUEZ, SONJA
Address: 9130 S. DADELAND BLVD. #1613
City-St-Zip: MIAMI, FL 33156

Title: S () Delete
Name: CLERCH, OSVALDO
Address: 9130 S. DADELAND BLVD.#1613
City-St-Zip: MIAMI, FL 33156

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 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: SONJA RODRIGUEZ

P

01/21/2009

Electronic Signature of Signing Officer or Director

_____ Date