

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 524660

FILED
Mar 17, 2011
Secretary of State

Entity Name: TREASURE COAST ABSTRACT AND TITLE INSURANCE CO.

Current Principal Place of Business:

426 AVENUE A
FT. PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

426 AVENUE A
FT. PIERCE, FL 34950

New Mailing Address:

FEI Number: 59-1718704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEE, FRANK H III
426 AVENUE A
FT. PIERCE, FL 34950 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: FEE, FRANK H III
Address: 426 AVENUE A
City-St-Zip: FT. PIERCE, FL 34950 US

Title: VST
Name: FEE, LEVAN N
Address: 2821 S. INDIAN RIVER DR
City-St-Zip: FORT PIERCE, FL 34982 US

Title: V
Name: FEE, FRANK H IV
Address: 426 AVENUE A
City-St-Zip: FORT PIERCE, FL 34950 US

Title: V
Name: HODL, JENNIFER
Address: 426 AVENUE A
City-St-Zip: FORT PIERCE, FL 34950 US

Title: V
Name: MOORE, CONNIE S
Address: 426 AVENUE A
City-St-Zip: FORT PIERCE, FL 34950 US

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: FRANK H. FEE, III

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03/17/2011

Electronic Signature of Signing Officer or Director

Date