

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 259960

**FILED**  
**Apr 17, 2019**  
**Secretary of State**  
**8584324478CC**

**Entity Name:** COLUMBIA TITLE OF FLORIDA INC

**Current Principal Place of Business:**

201 ALHAMBRA CIRCLE  
SUITE 1060  
CORAL GABLES, FL 33134

**Current Mailing Address:**

ATTN: LEGAL DEPARTMENT  
333 SOUTH 7TH STREET 27TH FLOOR  
MINNEAPOLIS, MN 55402 US

**FEI Number:** 59-1004119

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title CFO  
Name AGUIRRE, HENA  
Address 201 ALHAMBRA CIRCLE, SUTIE 1060  
City-State-Zip: CORAL GABLES FL 33134

Title CEO  
Name SHUFFIELD, RONALD A  
Address 201 ALHAMBRA CIRCLE, SUITE 1060  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name STRANDMO, DANA D  
Address 333 SOUTH 7TH STREET  
27TH FLOOR  
City-State-Zip: MINNEAPOLIS MN 55402

Title DIRECTOR  
Name PELTIER, RONALD  
Address 333 SOUTH 7TH STREET  
27TH FLOOR  
City-State-Zip: MINNEAPOLIS MN 55402

Title SECRETARY  
Name BROWNE, MICHAEL T.  
Address 333 SOUTH 7TH STREET  
27TH FLOOR  
City-State-Zip: MINNEAPOLIS MN 55402

*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: MICHAEL T. BROWNE**

**SECRETARY**

**04/17/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date