#### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079001

Entity Name: ASSURANCE LAND TITLE & ESCROW, INC.

FILED
May 16, 2016
Secretary of State
CC0394141525

# **Current Principal Place of Business:**

1101 IDLEWILD AVENUE

GREEN COVE SPRINGS, FL 32043

## **Current Mailing Address:**

1646 RIVERS ROAD

GREEN COVE SPRINGS. FL 32043 US

FEI Number: 06-1639515 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

HUNTER, SHARRI B 1646 RIVERS ROAD GREEN COVE SPRINGS, FL 32043 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 P Title V

Name HUNTER, SHARRI B Name BRIDGES, KATHRYN H

Address 1646 RIVERS ROAD Address 519 DEER PATH

City-State-Zip: GREEN COVE SPRINGS FL 32043 City-State-Zip: GREEN COVE SPRINGS FL 32043

Title ST

Name HUNTER, HARRY L Address 1646 RIVERS ROAD

City-State-Zip: GREEN COVE SPRINGS FL 32043

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: HARRY L. HUNTER

SECRETARY/TREASURER 05/16/2016

Electronic Signature of Signing Officer/Director Detail

Date