

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 01, 2016
Secretary of State
CC5199624492

Entity Name: THE WHITWORTH TITLE GROUP, INC.

Current Principal Place of Business:

14502 N. DALE MABRY HIGHWAY,
SUITE 200
TAMPA, FL 33618

Current Mailing Address:

14502 N. DALE MABRY HIGHWAY,
SUITE 200
TAMPA, FL 33618 US

FEI Number: 14-1922754

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITWORTH, GRANT D
2012 W. SITKA ST.
TAMPA, FL 33604 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
Name OUELLETTE, NATALIA
Address 14502 N. DALE MABRY HIGHWAY,
SUITE 200
City-State-Zip: TAMPA FL 33618

Title VP
Name GRANT, CLARA
Address 14502 N. DALE MABRY HIGHWAY,
SUITE 200
City-State-Zip: TAMPA FL 33618

Title VP
Name STEPP, LYNDA
Address 14502 N. DALE MABRY HIGHWAY,
SUITE 200
City-State-Zip: TAMPA FL 33618

Title VP
Name BOYER, SANDRA
Address 14502 N. DALE MABRY HIGHWAY,
SUITE 200
City-State-Zip: TAMPA FL 33618

Title VP
Name OHNMACHT, MARGARET
Address 14502 N. DALE MABRY HIGHWAY,
SUITE 200
City-State-Zip: TAMPA FL 33618

Title VP
Name LAWLESS, JOHN
Address 14502 N. DALE MABRY HIGHWAY,
SUITE 200
City-State-Zip: TAMPA FL 33618

Title VP
Name WHITWORTH, GRANT D
Address 14502 N. DALE MABRY HIGHWAY,
SUITE 200
City-State-Zip: TAMPA FL 33618

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: CLARA GRANT

VP

02/01/2016

Electronic Signature of Signing Officer/Director Detail

Date