2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2012
Secretary of State

DOCUMENT# 177435

Entity Name: DODD TITLE COMPANY, INC.

Current Principal Place of Business:

40 FOURTH STREET
P. O. BOX 38
APALACHICOLA, FL 32320

New Principal Place of Business:

40 FOURTH STREET
APALACHICOLA, FL 32320

Current Mailing Address:

40 FOURTH STREET
P. O. BOX 38
APALACHICOLA, FL 32320

New Mailing Address:

FEI Number: 59-0724706 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHULER, J G
100 21ST AVE
APALACHICOLA, FL 32320 US

Name and Address of New Registered Agent:

JOHNSON, KIMBERLY L
40 4TH STREET
APALACHICOLA, FL 32320 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: KIMBERLY L. JOHNSON 01/10/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: SHULER, ALFRED
Address: 34- 4TH ST.
City-St-Zip: APALACHICOLA, FL 32320 US

Title: DP
Name: SHULER, J. GORDON
Address: 34 - 4TH ST.
City-St-Zip: APALACHICOLA, FL 32320 US

Title: TSD
Name: SHULER, THOMAS M
Address: 34-4TH ST.
City-St-Zip: APALACHICOLA, FL 32320 US

Title: VP
Name: MALOY, LINDA C
Address: 34-4TH STREET
City-St-Zip: APALACHICOLA, FL 32320 US

Title: VP
Name: JOHNSON, KIMBERLY L
Address: 1627 LINDEN RD
City-St-Zip: APALACHICOLA, FL 32320 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: KIMBERLY L. JOHNSON VP 01/10/2012
Electronic Signature of Signing Officer or Director Date