

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 259960

FILED
Apr 19, 2011
Secretary of State

Entity Name: COLUMBIA TITLE OF FLORIDA INC

Current Principal Place of Business:

666 GRAND AVE. #2900
DES MOINES, IA 503030657

New Principal Place of Business:

Current Mailing Address:

BOX 657
DES MOINES, IA 503030657

New Mailing Address:

FEI Number: 59-1004119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CFO
Name: AGUIRRE, HENA
Address: 1360 S DIXIE HWY
City-St-Zip: CORAL GABLES, FL 33146

Title: CEO
Name: SHUFFIELD, RONALD A
Address: 1360 S DIXIE HWY
City-St-Zip: CORAL GABLES, FL 33146

Title: DIR
Name: MOLINE, ROBERT
Address: 333 SOUTH 7TH ST. #2700
City-St-Zip: MINNEAPOLIS, MN 55402

Title: DIR
Name: PELTIER, RONALD
Address: 333 SOUTY 7TH ST., #2700
City-St-Zip: MINNEAPOLIS, MN 55402

Title: S
Name: STRANDMO, DANA D
Address: 333 SOUTH 7TH STREET, SUITE 2700
City-St-Zip: MINNEAPOLIS, MN 55402

Title: AS
Name: LEIGHTON, PAUL J
Address: 666 GRAND AVENUE
City-St-Zip: DES MOINES, IA 50309

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: PAUL J. LEIGHTON

AS

04/19/2011

Electronic Signature of Signing Officer or Director

Date