## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 330029** 

FILED Jan 05, 2005 Secretary of State

Entity Name: TITLE SERVICES OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

 2876 MADISON STREET
 2876 MADISON STREET

 P.O. BOX 815
 P.O. BOX 815

 MARIANNA, FL 32446
 MARIANNA, FL 32448

Current Mailing Address: New Mailing Address:

 2876 MADISON STREET
 2876 MADISON STREET

 P.O. BOX 815
 P.O. BOX 815

 MARIANNA, FL 32446
 MARIANNA, FL 32448

FEI Number: 59-1218687 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BROWN, JACK 707 2ND STREET P.O. BOX 815
MARIANNA, FL 32446 US MARIANNA, FL 32447 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: JACK R. BROWN, JR. 01/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VP
 ( ) Delete
 Title:
 VP
 (X) Change ( ) Addition

 Name:
 EVERETT, ELVIA P.
 Name:
 MATHIS, ELVIA P.

 Address:
 4845 ROOKS DRIVE
 Address:
 4845 ROOKS DRIVE

Address: 4845 ROOKS DRIVE Address: 4845 ROOKS DRIVE
City-St-Zip: MARIANNA, FL 32446

Title: ST () Delete Title: ST (X) Change () Addition Name: JAMES, CEILIA JAY Name: JAMES, CEILIA JAY

Address: P.O. BOX 6011/3999 OLD COTTONDALE ROAD Address: P.O. BOX 6011/3999 OLD COTTONDALE ROAD

City-St-Zip: MARIANNA, FL 32447

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BROWN, JACK R. JR.,
 Name:
 BROWN JR, JACK R

 Address:
 707 2ND STREET
 Address:
 P.O. BOX 815

 City-St-Zip:
 MARIANNA, FL
 City-St-Zip:
 MARIANNA, FL
 32447

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JACK R. BROWN, JR. P 01/05/2005