

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 330029

FILED  
Jan 25, 2008  
Secretary of State

**Entity Name:** TITLE SERVICES OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

2876 MADISON STREET  
P.O. BOX 815  
MARIANNA, FL 32448

**New Principal Place of Business:**

2876 MADISON STREET  
MARIANNA, FL 32448

**Current Mailing Address:**

2876 MADISON STREET  
P.O. BOX 815  
MARIANNA, FL 32448

**New Mailing Address:**

P.O. BOX 815  
MARIANNA, FL 32447

**FEI Number:** 59-1218687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN JR, JACK R  
2876 MADISON STREET  
MARIANNA, FL 32448 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: MATHIS, ELVIA P.  
Address: 4845 ROOKS DRIVE  
City-St-Zip: MARIANNA, FL 32446

Title: ST ( ) Delete  
Name: JAMES, CEILIA JAY  
Address: P.O. BOX 6011/3999 OLD COTTONDALE ROAD  
City-St-Zip: MARIANNA, FL 32447

Title: P ( ) Delete  
Name: BROWN JR, JACK R  
Address: P.O. BOX 815  
City-St-Zip: MARIANNA, FL 32447

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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

01/25/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date