


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2008 08:00 A
Secretary of State

DOCUMENT # 408891 1. Entity Name SUNCOAST TITLE COMPANY OF FLORIDA, INC.	
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Principal Place of Business 7241 49TH STREET NORTH PINELLAS PARK, FL 33781 US	Mailing Address 7241 49TH STREET NORTH PINELLAS PARK, FL 34665
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DO NOT WRITE IN THIS SPACE



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1441090	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KANNER, MENI 5010 PARK BLVD. PINELLAS PARK, FL 33781	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000362865 04/03/08-80069-021 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KANNER, MENI 5010 PARK BLVD. PINELLAS PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KANNER, MENI 5010 PARK BLVD. PINELLAS PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KANNER, MALINA 5010 PARK BLVD PINELLAS PARK, FL 33781
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Meni Kanner* **3-17-08** **727-544-8824**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #