

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 665739

FILED
Jan 25, 2007
Secretary of State

Entity Name: CAPITAL TITLE COMPANY OF WEST PALM BEACH

Current Principal Place of Business:

4400 PGA BLVD
STE. 900
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

4400 PGA BLVD
STE. 900
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 59-2000374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVELLE, ALBERT L., III
4400 PGA BLVD
STE. 900
PALM BEACH GARDENS, FL 33410 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: PTD () Delete
Name: DEVELLE, ALBERT L., III
Address: 4400 PGA BLVD # 900
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SD () Delete
Name: DEVELLE, KATHY J.,
Address: 4400 PGA BLVD # 900
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: DEVELLE, DANIEL L.,
Address: 4400 PGA BLVD # 900
City-St-Zip: PALM BEACH GARDENS, FL 33418

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 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: ALBERT L DEVELLE III

PTD

01/25/2007

Electronic Signature of Signing Officer or Director

Date