

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722243

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: FLORIDA LAND TITLE ASSOCIATION, INC.

## Current Principal Place of Business:

249 E VIRGINIA ST  
TALLAHASSEE, FL 32301 US

## New Principal Place of Business:

## Current Mailing Address:

249 E VIRGINIA ST  
TALLAHASSEE, FL 32301 US

## New Mailing Address:

FEI Number: 23-7315382      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUSZAGH, LEE  
249 E VIRGINIA ST  
TALLAHASSEE, FL 32301 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: P ( ) Delete  
Name: GEIGLE, SUE  
Address: 2000 MAIN ST  
City-St-Zip: DUNEDIN, FL 34698

Title: D ( ) Delete  
Name: MCCALL, ALAN  
Address: 2233 LEE RD  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: STEWART, SHELLEY  
Address: 2335 BEVILLE RD  
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D ( ) Delete  
Name: MCNEAL, BECKY  
Address: 1435 E PIEDMONT DR #110  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: KALMANSON, STACY  
Address: 200 N ORANGE AVE, STE 500  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: BOOTH, R.F. B. JR  
Address: 2400 SE VETERANS MEM PKWY, STE 214  
City-St-Zip: PORT SAINT LUCIE, FL 34952

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCCALL, ALAN  
Address: 2233 LEE RD  
City-St-Zip: WINTER PARK, FL 32789

Title: D (X) Change ( ) Addition  
Name: PAT, HANCOCK  
Address: 850 TRAFALGAR SQ  
City-St-Zip: MAITLAND, FL 32751

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

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

Title: D (X) Change ( ) Addition  
Name: FRANK, TRICOMI  
Address: 493 SR 436  
City-St-Zip: CASSLEBERRY, FL 32707

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE HUSZAGH

SEC

04/20/2009

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

\_\_\_\_\_  
Date