## **2004 FOR PROFIT CORPORATION**

## ANNUAL REPORT

FILED Jan 15, 2004 8:00 am Secretary of State

DOCUMENT # F03000002656  1. Entity Name TITLESOURCE, LTD., CORPORATION					01-15-2004 90011 033 ***150.00			
Principal Plac	ce of Business	Mailing Address	<del> </del>		22	1054901		
2677 COUNTY ROAD 10 Moundsview, MN 55112		2677 COUNTY ROAD 16 MOUNDSVIEW, MN 551				,		
				1 (3 87) 3 8 4 10 1	DIGE IIII KARI BARI ARRI	1 <b>63</b> 111 <b>63</b> 14 8 11616 8 1161 8 1166 1	IIII BI II IBBI	
2. Principal Place of Business		3. Mailing Address	***************************************					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	* * <b>* * * *</b> * * * * * * * * * * * * *	01062004	Chg-P	CR2E034 (10/03)	ı	
City & State		City & State		4. FEI Number	41-1959	3841	pplied For	
Zip	Country	Ζίρ	Country	- 1	f Status Desired	S8.75 Ad	iditional	
	6. Name and Address of Current	Registered Agent		7. Name and A	ddress of New R	· · · · · · · · · · · · · · · · · · ·		
C T COPE	ODATION SVETEM		Name					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip Coo	de	
8. The above the obligat	named entity submits this statement for tions of registered agent.	r the purpose of changing its	registered office or regis	stered agent, or both	, in the State of Flo	rida. I am familiar with	, and accept	
SIGNATURE	Signature, typed or printed name of registered agent.	and title if applicable. (NOTE	: Registered Agent signature requ	ired when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Fi				55.00 May Be dded to Fees				
10.	OFFICERS AND			<b>i</b>	HANGES TO OFFI			
TITLE		DIRECTORS	11.	ADDITIONS/C		CERS AND DIRECTOR	IS IN 11	
	CEOC	DIRECTORS Delete	TITLE	ADDITIONS/C	THIS COLOT TO CITY	CERS AND DIRECTOR  Change	RS IN 11	
NAME STREET ADDRESS	JONAS, TRENT		TITLE NAME	ADDITIONS/C	113,420,10,0171			
NAME STREET ADDRESS CITY-ST-ZIP	JONAS, TRENT 2677 COUNTY ROAD 10		TITLE NAME STREET ADDRESS	ADDITIONS/C	TIPS GEO TO GIVE			
STREET ADDRESS	JONAS, TRENT		TITLE NAME	ADDITIONS/C	11124020 10 0171	☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/C				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/C		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112	□ Delete □ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	ADDITIONS/C		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/C	11134CEC 10 G171	☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	□ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS	ADDITIONS/C		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER	☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ADDITIONS/C	= · -	☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	□ Delete □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE TITLE NAME TITLE	ADDITIONS/C		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME NAME	ADDITIONS/C	- ·	☐ Change ☐ Change ☐ Change	Addition  Addition  Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE TITLE NAME TITLE	ADDITIONS/C	=	☐ Change ☐ Change ☐ Change	Addition  Addition  Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS STREET ADDRESS	ADDITIONS/C	=	☐ Change ☐ Change ☐ Change	Addition  Addition  Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE NAME	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ADDITIONS/C	=	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS	ADDITIONS/C	=	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS - CITY-ST-ZIP TITLE NAME STREET ADDRESS - TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/C	=	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition  Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		= · ·	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	JONAS, TRENT 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 COOD MIELKE, THOM 2677 COUNTY ROAD 10 MOUNDSVIEW, MN 55112 SD FRANTZ, JEFFIFER 2677 COUNTY ROAD 10	☐ Delete ☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ADDITIONS/C	=	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition  Addition	

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or directive 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:

YPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

651 646-8660