

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002721

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: GREAT LAKES TITLE AND ESCROW COMPANY

**Current Principal Place of Business:**

208 EAST RIDGEVILLE BLVD., SUITE 203  
MOUNT AIRY, MD 21771

**New Principal Place of Business:**

1604 RIDGESIDE CT. #204  
MOUNT AIRY, MD 21771

**Current Mailing Address:**

208 EAST RIDGEVILLE BLVD., SUITE 203  
MOUNT AIRY, MD 21771

**New Mailing Address:**

1604 RIDGESIDE CT. #204  
MOUNT AIRY, MD 21771

FEI Number: 51-0397750

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: P ( ) Delete  
Name: HURLEY, MARY L  
Address: 6548 CHALLEDON CIRCLE  
City-St-Zip: MT. AIRY, MD 21771

Title: VS ( ) Delete  
Name: HURLEY, KIP  
Address: 6548 CHALLEDON CIRCLE  
City-St-Zip: MT. AIRY, MD 21771

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

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

Title: VS (X) Change ( ) Addition  
Name: HURLEY, KIPLING K  
Address: 6548 CHALLEDON CIRCLE  
City-St-Zip: MT. AIRY, MD 21771

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: KIP HURLEY

COO

01/05/2007

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

\_\_\_\_\_  
Date