

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2008 8:00 am
Secretary of State

02-01-2008 90026 035 ***150.00

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1. Entity Name
NEIGHBORHOOD TITLE GROUP, INC.



Principal Place of Business

70 LENOX POINTE
ATLANTA, GA 30324

Mailing Address

70 LENOX POINTE
ATLANTA, GA 30324

DO NOT WRITE IN THIS SPACE



01252008 No Chg-P CR2E034 (11/05)

4. Filing Number
31-1831165

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLORIDA COMPLIANCE SPECIALISTS, INC.
2331 HANSEN PLACE
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
CEO
FRYER, CLARA L
70 LENOX POINTE
ATLANTA, GA 30324

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
CD
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70 LENOX POINTE
ATLANTA, GA 30324

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CITY-STATE-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in the 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 full effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 190, 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:

Xcel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 1-25-08

404.240.0007
Telephone #