

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2007 8:00 am
Secretary of State

02-01-2007 90023 042 ***158.75

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1. Entity Name
FIRST CHOICE SEARCH & ABSTRACT, INC.



Principal Place of Business
**1228 RADCLIFFE ST
BRISTOL, PA 19007**

Mailing Address
**1228 RADCLIFFE ST
BRISTOL, PA 19007**



01222007 No Chg-P CR2E034 (11/05)

4. FEI Number
75-3116720

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PK DR STE 4
WESTON, FL 33331**

**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, or both, 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	CDPT
NAME	LINDNER, MARTHA F
STREET ADDRESS	866 CLAY AVE
CITY-ST-ZIP	LANGHORNE, PA 19047
TITLE	VCDV S
NAME	LINDNER, FRANK B
STREET ADDRESS	866 CLAY AVE 9 Hopewell Lane
CITY-ST-ZIP	LANGHORNE, PA 19047 Hulmeville PA 19047
TITLE	S
NAME	LINDNER, FRANK B
STREET ADDRESS	866 CLAY AVE
CITY-ST-ZIP	LANGHORNE, PA 19047
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marta F Lindner President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-07

Date

215-826-8530

Daytime Phone #