

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002556

FILED
Feb 26, 2008
Secretary of State

Entity Name: SONORAN TITLE SERVICES, INC.

Current Principal Place of Business:

1711 W GREENTREE DR
SUITE 225
TEMPE, AZ 85284

New Principal Place of Business:

Current Mailing Address:

1711 W GREENTREE DR
SUITE 225
TEMPE, AZ 85284

New Mailing Address:

FEI Number: 20-0956126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA COMPLIANCE SPECIALISTS INC
2333 HANSEN PLACE
STE 3
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LIPPENS, STEPHEN
Address: 1721 W GREENTREE DR, SUITE 101
City-St-Zip: TEMPE, AZ 85284

Title: D () Delete
Name: STALLMAN, JEFFREY
Address: 1721 W GREENTREE DR, SUITE 101
City-St-Zip: TEMPE, AZ 85284

Title: P () Delete
Name: GRIFFIN, RICHARD
Address: 1711 W GREENTREE DR, SUITE 225
City-St-Zip: TEMPE, AZ 85284

Title: VP () Delete
Name: RAEMISUH, JAMES
Address: 1711 W GREENTREE DR, SUITE 225
City-St-Zip: TEMPE, AZ 85284

Title: S () Delete
Name: ARCHAMBAULT, RICHARD A
Address: 1711 W GREENTREE DR, SUITE 225
City-St-Zip: TEMPE, AZ 85284

Title: T () Delete
Name: KOHNHORST, KENNETH
Address: 1711 W GREENTREE DR, SUITE 225
City-St-Zip: TEMPE, AZ 85284

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP (X) Change () Addition
Name: RAEMISCH, JAMES
Address: 1711 W GREENTREE DR, SUITE 225
City-St-Zip: TEMPE, AZ 85284

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

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

SIGNATURE: JAMES RAEMISCH

VP

02/26/2008

Electronic Signature of Signing Officer or Director

Date