

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F59899

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** EXECUTIVE TITLE SERVICES OF FLORIDA, INC.

**Current Principal Place of Business:**

7316 SR 52  
HUDSON, FL 34667 US

**New Principal Place of Business:**

5419 MAIN STREET  
NEW PORT RICHEY, FL 34652 US

**Current Mailing Address:**

7316 SR 52  
HUDSON, FL 34667 US

**New Mailing Address:**

5419 MAIN STREET  
NEW PORT RICHEY, FL 34652 US

**FEI Number:** 59-2144434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRIS, SALLY A.  
7316 SR 52  
HUDSON, FL 34667 US

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

MORRIS, SALLY A.  
5419 MAIN STREET  
NEW PORT RICHEY, FL 34652 US

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: SALLY A. MORRIS

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MORRIS, SALLY A.  
Address: 5419 MAIN STREET  
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby 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 all other like empowered.

SIGNATURE: SALLY A. MORRIS

PRES

04/30/2012

Electronic Signature of Signing Officer or Director

Date