2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# G31726

Entity Name: COMPLETE TITLE SERVICES, INC.

Current Principal Place of Business:

28821 US 19 N
CLEARWATER, FL 33761

New Principal Place of Business:

2744 SUMMERDALE DR
CLEARWATER, FL 33761

Current Mailing Address:

28821 US 19 N
CLEARWATER, FL 33761

New Mailing Address:

2744 SUMMERDALE DR
CLEARWATER, FL 33761

FEI Number: 59-2276255 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RATSEK, JOANNE M.
28821 US HWY 19 N
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

RATSEK, JOANNE M.
2744 SUMMERDALE DR
CLEARWATER, FL 33761 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: 04/08/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RATSEK, JOANNE M
Address: 28821 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RATSEK, JOANNE M
Address: 2744 SUMMERDALE DR
City-St-Zip: CLEARWATER, FL 33761

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: JOANNE M RATSEK PRES 04/08/2009
Electronic Signature of Signing Officer or Director — Date