

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G68950

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** PINELLAS PARK TITLE COMPANY

**Current Principal Place of Business:**

6075 PARK BOULEVARD  
B  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

6075 PARK BOULEVARD  
B  
PINELLAS PARK, FL 33781

**New Mailing Address:**

**FEI Number:** 59-2341263

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARY, EVELYN  
4385 76TH TERRACE  
PINELLAS PARK, FL 33781 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARY, EVELYN E.  
Address: 6075 PARK BOULEVARD SUITE B  
City-St-Zip: PINELLAS PARK, FL 33781

Title: V.P.  
Name: MITCHELL, AMANDA  
Address: 6075 PARK BOULEVARD SUITE B  
City-St-Zip: PINELLAS PARK, FL 33781 US

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: EVELYN CARY

PRES

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date