

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H06393

FILED
Apr 18, 2007
Secretary of State

Entity Name: LEE TITLE AND ABSTRACT, INC.

Current Principal Place of Business:

706 S DIXIE HWY
CORAL GABLES, FL 33146 US

New Principal Place of Business:

Current Mailing Address:

706 S DIXIE HWY
CORAL GABLES, FL 33146 US

New Mailing Address:

FEI Number: 59-2455566 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSEN, THOMAS W III
706 S DIXIE HWY
CORAL GABLES, FL 33146 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: SV () Delete
Name: TURNER, JULIE A
Address: 706 S. DIXIE HWY 2ND FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: P () Delete
Name: OLSEN, THOMAS W. III
Address: 706 S DIXIE HWY
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: THOMAS W. OLSEN III

P

04/18/2007

Electronic Signature of Signing Officer or Director

_____ Date