2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2005
Secretary of State

DOCUMENT# H30572

Entity Name: HILLSBOROUGH TITLE, INC.

Current Principal Place of Business:

504 E. BAKER ST.
PLANT CITY, FL 33563 US

New Principal Place of Business:

1605 S ALEXANDER STREET
102
PLANT CITY, FL 33563 US

Current Mailing Address:

504 E. BAKER ST.
PLANT CITY, FL 33563 US

New Mailing Address:

1605 S ALEXANDER STREET
102
PLANT CITY, FL 33563 US

FEI Number: 59-2465719 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCGRATH, GAIL C
1007 E SANDALWOOD DRIVE N
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

MCGRATH, GAIL C
612 SANDALWOOD DRIVE
PLANT CITY, FL 33563 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: GAIL CALHOUN MCGRATH 01/14/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: MCGRATH, GAIL C
Address: 1007 E. SANDALWOOD DRIVE N
City-St-Zip: PLANT CITY, FL 33563 US

Title: VP ( ) Delete
Name: DAVIS, AARON M
Address: 1302 VICTORIA ST
City-St-Zip: PLANT CITY, FL 33563 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition
Name: MCGRATH, GAIL C
Address: 612 SANDALWOOD DRIVE
City-St-Zip: PLANT CITY, FL 33563 US

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 Section 119.07(3)(i), 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: AARON M DAVIS VP 01/14/2005
Electronic Signature of Signing Officer or Director Date