

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J25584

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** STANDARD TITLE INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

1860 FOREST HILL BLVD  
SUITE 107  
WEST PALM BCH, FL 33406 US

**New Principal Place of Business:**

**Current Mailing Address:**

1860 FOREST HILL BLVD  
SUITE 105  
WEST PALM BCH, FL 33406 US

**New Mailing Address:**

**FEI Number:** 59-2820211

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRANTHAM, KIRK  
1860 FOREST HILL  
STE 107  
WEST PALM BCH, FL 33406 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: DPV  
Name: GRANTHAM, KIRK  
Address: 1860 FOREST HILL BLVD SUITE 107  
City-St-Zip: WEST PALM BCH, FL

Title: DPV  
Name: GRANTHAM, KIRK  
Address: 1860 FOREST HILL BLVD SUITE 107  
City-St-Zip: WEST PALM BEACH, FL

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: KIRK GRANTHAM

PRES

04/30/2012

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

\_\_\_\_\_  
Date