

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J32867

FILED
Jul 26, 2006
Secretary of State

Entity Name: PROVIDENCE TITLE INSURANCE CORP.

Current Principal Place of Business:

8220 STATE ROAD 84 STE 302
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

8220 STATE ROAD 84 STE 302
DAVIE, FL 33324

New Mailing Address:

FEI Number: 59-2736009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRACOFF, ELLEN K.
8220 STATE ROAD 84
SUITE 302
DAVIE, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDV () Delete
Name: KRACOFF, ELLEN K.,
Address: 5318 SW 86TH WAY
City-St-Zip: COOPER CITY, FL

Title: ST () Delete
Name: KRACOFF, ELLEN
Address: 5318 SE 86TH WAY
City-St-Zip: COOPER CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDV (X) Change () Addition
Name: KRACOFF, ELLEN K.,
Address: 786 S.W. 159 WAY
City-St-Zip: PEMBROKE PINES, FL 33027

Title: ST (X) Change () Addition
Name: KRACOFF, ELLEN
Address: 786 S.W. 159 WAY
City-St-Zip: PEMBROKE PINES, FL 33027

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: ELLEN K. KRACOFF

PDV

07/26/2006

Electronic Signature of Signing Officer or Director

Date