## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41141

Entity Name: FIRST TITLE AND ABSTRACT, INC.

FILED Mar 18, 2009 Secretary of State

Surrent Principal Place of Business:	New Principal Place of Business

606 BALD EAGLE DR, STE 501 606 BALD EAGLE DR, P O BOX 2000 SUITE 501

MARCO ISLAND, FL 33969 US MARCO ISLAND, FL 34145 US

Current Mailing Address: New Mailing Address:

606 BALD EAGLE DR, STE 501
P O BOX 2000
MARCO ISLAND, FL 33969 US
606 BALD EAGLE DR, STE 501
P O BOX 2000
MARCO ISLAND, FL 34146 US

FEI Number: 59-2732938 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WOODWARD, CRAIG R.

606 BALD EAGLE DR, STE 500

MARCO ISLAND, FL 33937 US

WOODWARD, CRAIG R.

606 BALD EAGLE DR,

STE 500

MARCO ISLAND, FL 34145 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: 03/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title:

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DS () Delete Title: DS (X) Change () Addition WOODWARD, CRAIG R., 606 BALD EAGLE DR, #501 Address: 606 BALD EAGLE DR, #501 MARCO ISLAND, FL City-St-Zip: MARCO ISLAND, FL 34145

City-St-Zip: MARCO ISLAND, FL City-St-Zip: MARCO ISLAND, FL 34145

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 WOODWARD, CRAIG R.,
 Name:
 WOODWARD, CRAIG R.,

 Address:
 606 BALD EAGLE DR, #501
 Address:
 606 BALD EAGLE DR, #501

 City-St-Zip:
 MARCO ISLAND, FL
 34145

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WOODWARD, MARK J
 Name:

 Address:
 3200 TAMIAMI TRAIL NORTH 200
 Address:

 City-St-Zip:
 NAPLES, FL 34103
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CRAIG R. WOODWARD S 03/18/2009