

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K57955

FILED
Mar 15, 2004
Secretary of State

Entity Name: EXECUTIVE TITLE INSURANCE SERVICES, INC.

Current Principal Place of Business:

1136 NE PINE ISLAND RD
STE 12
CAPE CORAL, FL 33909 US

New Principal Place of Business:

4109 DEL PRADO BOULEVARD
CAPE CORAL, FL 33904 US

Current Mailing Address:

1136 NE PINE ISLAND RD
STE 12
CAPE CORAL, FL 33909 US

New Mailing Address:

4109 DEL PRADO BOULEVARD
CAPE CORAL, FL 33904 US

FEI Number: 65-0093460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RACKAY, MARK J
1136 NE PINE ISLAND RD
STE 12
FORT MYERS, FL 33919

Name and Address of New Registered Agent:

RACKAY, MARK J
1136 NE PINE ISLAND RD
SUITE 37
FORT MYERS, FL 33919

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:

03/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: YANKOWSKI, RICHARD S. .
Address: 1136 NE PINE ISLAND RD STE 12
City-St-Zip: CAPE CORAL, FL 33909

Title: VSTD () Delete
Name: ROBERTSON, LENORA A
Address: 1136 NE PINE ISLAND RD STE 12
City-St-Zip: CAPE CORAL, FL 33909

Title: VP () Delete
Name: RACKAY, MARK J
Address: 1136 NE PINE ISLAND RD STE 12
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: RICHARD S. YANKOWSKI

DP

03/15/2004

Electronic Signature of Signing Officer or Director

Date