2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90375

Entity Name: GULLETT TITLE, INC.

FILED Jul 02, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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415 ST. JOHNS AVE
PALATKA, FL 32177 US
401 ST. JOHNS AVE
PALATKA, FL 32177 US

Current Mailing Address: New Mailing Address:

415 ST JOHNS AVENUE 401 ST. JOHNS AVE PALATKA, FL 32177 US PALATKA, FL 32177 US

FEI Number: 59-3019844 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:

GULLETT, JJ
415 ST JOHNS AVE
PALATKA, FL 32177 US
GULLETT, JJ
401 ST JOHNS AVE
PALATKA, FL 32177 US
PALATKA, FL 32177 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: JJ GULLETT 07/02/2008

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GULLETT, JASON, H, Name: Name: GULLETT, JASON, H, 415 ST. JOHNS AVENUE 415 ST. JOHNS AVENUE Address: Address: City-St-Zip: PALATKA, FL 32177 City-St-Zip: PALATKA, FL 32177

Address: 138 TIMBER LANE Address: 138 TIMBER LANE
City-St-Zip: PALATKA, FL 32177
City-St-Zip: PALATKA, FL 32177

Title: T () Delete Title: () Change () Addition

 Name:
 GULLETT, KIM K
 Name:

 Address:
 415 ST. JOHNS AVENUE
 Address:

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 GULLETT, AMY J
 Name:

 Address:
 138 TIMBER LANE SOUTH
 Address:

 City-St-Zip:
 PALATKA, FL 32177
 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: JJ GULLETT PCEO 07/02/2008