## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006185

FILED Jul 20, 2009 Secretary of State

Entity Name: THE EMERSON STREET TITLE HOLDING COMPANY

Current Principal Place of Business: New Principal Place of Business:

4401 EMERSON ST. JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

4401 EMERSON STREET SUITE 1 JACKSONVILLE, FL 32207

FEI Number: 59-3411330 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

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

ETTLINGER, CAROLYN W HAMPEL, HARRY K 4401 EMERSON ST. 4401 EMERSON ST.

JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32207 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: HARRY K. HAMPEL 07/20/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WHITNER, JOHN
 Name:
 WULBERN, ALLAN E

 Address:
 225 WATER STREET
 Address:
 225 WATER STREET SUITE 1800

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:
 JACKSONVILLE, FL 32202

Title: SEC ( ) Delete Title: VP (X) Change ( ) Addition Name: BROWN, JOYCE Name: MAXWELL, PAMELA

Address: 2121 THOMAS COURT Address: 801 W. BAY STREET
City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32204

Title: VP ( ) Delete Title: TREA (X) Change ( ) Addition Name: MAXWELL, PAMELA Name: SCOFIELD, JANE

 Address:
 801 W. BAY STREET
 Address:
 1354 N LAURA STREET

 City-St-Zip:
 JACKSONVILLE, FL 32204
 City-St-Zip:
 JACKSONVILLE, FL 32206

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

 Name:
 WHITNER, JOHN
 Name:

 Address:
 225 WATER STREET 2ND FLOOR
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32202
 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLAN E. WULBERN PRES 07/20/2009