

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000015778

FILED
Apr 23, 2004
Secretary of State

Entity Name: NHF TITLE & TRUST, INC.

Current Principal Place of Business:

4000 PONCE DE LEON BLVD
STE 470
CORAL GABLES, FL 33146

Current Mailing Address:

4000 PONCE DE LEON BLVD
STE 470
CORAL GABLES, FL 33146

New Principal Place of Business:

4000 PONCE DE LEON BLVD
STE 470
CORAL GABLES, FL 33146 US

New Mailing Address:

301 N CATTLEMEN RD
STE 205
SARASOTA, FL 34232 US

FEI Number: 65-1008436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARELA, KAREN L
4000 PONCE DE LEON BLVD
STE 470
CORAL GABLES, FL 33146

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLES, JASON D
Address: 301 N CATTLEMEN RD STE 205
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: SCHIPPER, JAMES R
Address: 301 N CATTLEMEN RD STE 205
City-St-Zip: SARASOTA, FL 34232

Title: P (X) Delete
Name: VARELA, KAREN L
Address: 4000 PONCE DE LEON BLVD STE 470
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHIPPER, JAMES R
Address: 301 N CATTLEMEN RD STE 205
City-St-Zip: SARASOTA, FL 34232 US

Title: P (X) Change () Addition
Name: VARELA, KAREN L
Address: 4000 PONCE DE LEON BLVD STE 470
City-St-Zip: CORAL GABLES, FL 33146 US

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: JAMES R SCHIPPER

D

04/23/2004

Electronic Signature of Signing Officer or Director

Date