## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P00000033122

1. Entity Name

**EMBASSY TITLE SERVICES CORPORATION** 



FILED Mar 29, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

9210 CYPRESS GREEN DRIVE JACKSONVILLE, FL 32256

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DO NOT WRITE IN THIS SPACE

 
 03272007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number NOT APPLICABLE
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WARD, ROBERT E III 9210 CYPRESS GREEN DR JACKSONVILLE, FL 32256

## DO NOT WRITE IN THIS SPACE

| SIGNATURE.  | Signature, typed or printed name of registered agent and title it   | d applicable. WOTE: Registered   | d Agent signature                          | required when reinstating)   | 3-28-0°  | 7          |
|---|---|--|--|--|--|------------|
| FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution. |   |  | ~ —  | \$5.00 May Be<br>Added to Fees   |  |            |
| 10.   | OFFICERS AND DIREC  | TORS   |  |  |  | ,          |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | D<br>WARD, ROBERT E III<br>9210 CYPRESS GREEN DRIVE<br>JACKSONVILLE, FL 32256   |  |  |  | ••.  |            |
| NAME STREET ADDRESS CITY-ST-ZIP   |   |  | -  |  | U00000682119<br>04/04/07-80074-0   | 103 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |  | •  | DO   | NOT WRITE  |            |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | :  |  | IN T   | HIS SPACE  |            |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |  |  |  |  | ,          |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |  |  |  |  | ,          |
| 12. I hereby of indicated of the corchanged,  | certify that the information supplied with this fi<br>on this report or supplemental report is true a<br>poration or the receiver or trustee empowered<br>or on an attachment with an address, with all | ing does not qualify for the exe<br>and accurate and that my signat<br>to execute this report as requir<br>other like empowered. | mptions cor<br>ure shall hav<br>ed by Chap | ntained in Chapter 119,<br>re the same legal effect<br>ter 607, Florida Statutes | Florida Statutes. I further certify the as if made under oath; that I am an and that my name appears in Bloom and the state of th |            |

8. 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. I am familiar with, and accept