# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 03, 2005**
**Secretary of State**

DOCUMENT# P00000117369

**Entity Name:** INTEGRITY TITLE AND ESCROW SERVICES, CORPORATION

**Current Principal Place of Business:**

4651 SALISBURY ROAD
SUITE NUMBER 170
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

4651 SALISBURY ROAD
SUITE 170
JACKSONVILLE, FL 32256

**New Mailing Address:**

2024 GILMORE STREET
JACKSONVILLE, FL 32204

**FEI Number: 59-3689446** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

MOODY, JIM O J.R.
2610 HERSCHEL STREET
JACKSONVILLE, FL 32204 US

**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: MOODY, JIMMY O JR.
Address: 3878 VALENCIA ROAD
City-St-Zip: JACKSONVILLE, FL 32205

Title: V ( ) Delete
Name: CUNNINGHAM, MARY M
Address: 9816 BROKEN OAK BLVD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition
Name: MOODY, JIMMY O JR.
Address: 2610 HERSCHEL STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: DVP (X) Change ( ) Addition
Name: CUNNINGHAM, MARY M
Address: 9816 BROKEN OAK BLVD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: S ( ) Change (X) Addition
Name: MILLER, JEFFREY M
Address: 2610 HERSCHEL STREET
City-St-Zip: JACKSONVILLE, FL 32204

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: JIM O. MOODY, JR. DP 01/03/2005

Electronic Signature of Signing Officer or Director — Date