

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117369

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

2024 GILMORE STREET  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

2024 GILMORE STREET  
JACKSONVILLE, FL 32204

**New Mailing Address:**

FEI Number: 59-3689446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOODY, JIM O J.R.  
2024 GILMORE 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: DP  
Name: MOODY, JIMMY O JR  
Address: 2024 GILMORE STREET  
City-St-Zip: JACKSONVILLE, FL 32204

Title: DV  
Name: MOODY, TERRI T  
Address: 4731 NW 53RD AVENUE, SUITE 2  
City-St-Zip: GAINESVILLE, FL 32653

I hereby 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 all other like empowered.

SIGNATURE: JIM O. MOODY, JR. \_\_\_\_\_

PRES

04/27/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date