

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000007752

FILED
Apr 28, 2008
Secretary of State

Entity Name: TRI-COUNTY TITLE & ESCROW, INC.

Current Principal Place of Business:

4400 N FEDERAL HWY,
208
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

4400 N FEDERAL HWY,
208
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 65-1070485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESON, MARK
4400 N FEDERAL HWY,
208
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

LOPEZ, SUSAN A
4400 N FEDERAL HWY,
208
BOCA RATON, FL 33431 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: SUSAN A. LOPEZ

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LOPEZ, SUSAN A
Address: 4400 N FEDERAL HWY #208
City-St-Zip: BOCA RATON, FL 33431

Title: DS () Delete
Name: LENSON, MARK
Address: 4400 N FEDERAL HWY #208
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN A. LOPEZ

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date