

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000011411



1. Entity Name
TOP NOTCH TITLE COMPANY

Principal Place of Business
10311 RADCLIFFE DRIVE
TAMPA, FL 33626

Mailing Address
10311 RADCLIFFE DRIVE
TAMPA, FL 33626

**FILED
Apr 30, 2007 08:00 A
Secretary of State**

DO NOT WRITE IN THIS SPACE

04262007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3695061	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

DESAUTELS, SHEILA M
16601 SOUNDING SHORES
ODESSA, FL 33556

**DO NOT WRITE
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

8. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

000000047869
05/17/07-80042-017 158.75

10. OFFICERS AND DIRECTORS

TITLE D
NAME DESAUTELS, PHILIP R
STREET ADDRESS 16601 SOUNDING SHORES
CITY-ST-ZIP ODESSA, FL 33556

TITLE D
NAME DESAUTELS, SHEILA M
STREET ADDRESS 16601 SOUNDING SHORES
CITY-ST-ZIP ODESSA, FL 33556

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sheila Desautels

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-07 813-855-2800

Date

Daytime Phone #