

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000013189

FILED
Mar 01, 2012
Secretary of State

Entity Name: TEAM TITLE INSURANCE AGENCY, INC.

Current Principal Place of Business:

4244 EVANS AVE.
FT. MYERS, FL 33901

New Principal Place of Business:

447 CAPE CORAL PKWY E
101
CAPE CORAL, FL 33904

Current Mailing Address:

4244 EVANS AVE.
FT. EVANS, FL 33901

New Mailing Address:

447 CAPE CORAL PKWY E
101
CAPE CORAL, FL 33904

FEI Number: 65-1077907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WUNDERLICH, RICHARD
4244 EVANS AVE.
FT. EVANS, FL 33901 US

Name and Address of New Registered Agent:

WUNDERLICH, SUSAN S
447 CAPE CORAL PKWY E UNIT 101
CAPE CORAL, FL 33904 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 WUNDERLICH

03/01/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: NOONAN, GINA
Address: 447 CAPE CORAL PKWY E UNIT 101
City-St-Zip: CAPE CORAL, FL 33904

Title: ST
Name: WUNDERLICH, SUSAN S
Address: 447 CAPE CORAL PKWY E UNIT 101
City-St-Zip: CAPE CORAL, FL 33904

Title: V
Name: DAVIS, JOHN
Address: 447 CAPE CORAL PKWY E UNIT 101
City-St-Zip: CAPE CORAL, FL 33904

Title: CEO
Name: WUNDERLICH, SUSAN S
Address: 447 CAPE CORAL PKWY E UNIT 101
City-St-Zip: CAPE CORAL, FL 33904

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: SUSAN S WUNDERLICH

CEO

03/01/2012

Electronic Signature of Signing Officer or Director

Date