

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000028076

FILED
Aug 29, 2008
Secretary of State

Entity Name: THE TITLE GROUP OF CENTRAL FL., INC.

Current Principal Place of Business:

535 N. FERNCREEK AVE.
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

535 N. FERNCREEK AVE.
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-3705344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBB, JOHN F
4916 CALLE DE SOL
ORLANDO, FL 32819 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: PD () Delete
Name: COBB, JOHN F
Address: 4916 CALLE DE SOL
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: O'BRYAN, MARCIA K
Address: 535 N. FERNCREEK AVENUE
City-St-Zip: ORLANDO, FL 32803

Title: TD () Delete
Name: PERRY, SUSAN
Address: 140 ALEXANDRIA BLVD. SUITE A
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: PERRY, SUSAN
Address: 535 N. FERNCREEK AVE
City-St-Zip: ORLANDO, FL 32803

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: FLOYD COBB

PD

08/29/2008

Electronic Signature of Signing Officer or Director

Date