



2006 FOR PROFIT REGISTRATION ANNUAL REPORT

Jul 10
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DOCUMENT # P01000066332 1. Entity Name AMERICAN TITLE ASSOCIATION, INC.		
Principal Place of Business 7990 SW 117TH AVENUE SUITE 135 MIAMI, FL 33183	Mailing Address 7990 SW 117TH AVENUE SUITE 135 MIAMI, FL 33183	
DO NOT WRITE IN THIS SPACE		06302006 No Chg-P CR2E034 (11/05)
4. FEI Number 65-1125250		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
Vias, Melissa 7990 SW 117TH AVENUE SUITE 135 MIAMI, FL 33183	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____		
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vias, Melissa 7990 SW 117TH AVENUE MIAMI, FL 33183	
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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 an officer like empowered.		
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>07/10/06</u> Daytime Phone # _____

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07/11/06-80001-009 550.00