2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000081956

1. Entity Name

COLLINS TITLE AFFILIATES, INC.



FILED
Jan 27, 2006 08:00 AM
Secretary of State

Principal Place of Business

17870 CHESTERFIELD ROAD NORTH FORT MYERS, FL 33917 Mailing Address

C/O ENGLANDER & FISCHER, P.A. PO BOX 1954

ST. PETERSBURG, FL 33731-1954



01242006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1142190 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

ENGLANDER & FISCHER, P.A. 721 FIRST AVE. N. ST. PETERSBURG, FL 33701

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the plons of registered agent.	urpose of changing its registered of	ffice or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title it	applicable. (NOTE, Registered Ag	ent signaturi	e required when reinstaling)	DATE
Fil. After M	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financin Trust Fund Contribution.	"	\$5.00 May Be Added to Fees	U00000403188 02/03/06-80038-015 150.00
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, HEATHER 17870 CHESTERFIELD ROAD NORTH FORT MYERS, FL 33917				
TITLE NAME STREET AODRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
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 That he laters