

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000100170

FILED
May 02, 2011
Secretary of State

Entity Name: SECURITY TITLE CARIBBEAN, INC.

Current Principal Place of Business:

2055 SOUTH KANNER HWY
STUART, FL 34994

New Principal Place of Business:

11369 OKEECHOBEE BLVD
STE B-100
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

2055 SOUTH KANNER HWY
STUART, FL 34994

New Mailing Address:

11369 OKEECHOBEE BLVD
STE B-100
ROYAL PALM BEACH, FL 33411

FEI Number: 65-1151474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KOHL, N. D JR ESQ
2055 SOUTH KANNER HWY
STUART, FL 34994 US

Name and Address of New Registered Agent:

SCHWARTZ, SHELLYE L
11369 OKEECHOBEE BLVD
STE B-100
ROYAL PALM BEACH, FL 33411 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: SHELLYE L. SCHWARTZ

05/02/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WICKER, LAVONNE L
Address: 11369 OKEECHOBEE BLVD, STE B-100
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: S
Name: KOHL, N D JR ESQ
Address: 11369 OKEECHOBEE BLVD, STE B-100
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: VP
Name: SQUADRITO, PAMELA J
Address: 11369 OKEECHOBEE BLVD, STE B-100
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

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: LAVONNE L. WICKER

PD

05/02/2011

Electronic Signature of Signing Officer or Director

Date