

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108886

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: TITLE SERVICES TAX AND LIEN, INC.

**Current Principal Place of Business:**

9477 LAGO DR.  
BOYNTON BEACH, FL 33472

**New Principal Place of Business:**

**Current Mailing Address:**

9477 LAGO DR.  
BOYNTON BEACH, FL 33472

**New Mailing Address:**

FEI Number: 65-1151906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCDONALD, WILLIAM E  
9477 LAGO DR  
BOYNTON BEACH, FL 33472 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: P ( ) Delete  
Name: MCDONALD, WILLIAM E  
Address: 9477 LAGO DR.  
City-St-Zip: BOYNTON BEACH, FL 33472

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: S/T ( ) Change (X) Addition  
Name: MCDONALD, RUTH ANN  
Address: 9477 LAGO DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33472

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: RUTH ANN MCDONALD

S/T

01/08/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date