2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000014796

FILED Jan 06, 2004 Secretary of State

Entity Name: MAJESTIC TITLE OF CENTRAL FLORIDA, INC.

N 4 D		of Booking and	New Britania I Blace	- f Dunius - a
Surrent Princ	icipai Piace	e of Business:	New Principal Place	of Business:
0012 N DALI	.E MABRY			
AMPA, FL 3	33618			
Current Mail	ling Addres	ss:	New Mailing Address	s:
0012 N DALI	E MABRY			
ÄMPA, FL 3	33618			
El Number: 02	2-0541852	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and Ad	ddress of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
/IILLER, APA				
2117 CHESTI AMPA, FL 3 he above na h the State of	NUT FORE 33618 Us amed entity f Florida.	5	ourpose of changing its registere	d office or registered agent, or both,
2117 CHESTI AMPA, FL 3 The above na	NUT FORE 33618 US amed entity f Florida.	S submits this statement for the p		
117 CHESTI AMPA, FL 3 The above na the State of SIGNATURE:	NUT FORE 33618 US amed entity f Florida. Electror	5		d office or registered agent, or both, Date
2117 CHESTI TAMPA, FL 3 The above na In the State of SIGNATURE:	MUT FORE 33618 US amed entity f Florida. Electror aign Financin	S submits this statement for the particle of Registered Age of Trust Fund Contribution ().	ent	
2117 CHESTIFAMPA, FL 3 The above nand the State of SIGNATURE: Clection Campa DFFICERS A Cittle: P Italiane: M Italiand SIGNATURE: P Italiane: M Italiand SIGNATURE: P Italiane: M Italiand SIGNATURE: P Italiand SIGNATURE:	amed entity f Florida. Electror aign Financin AND DIREC MILLER, APAS	submits this statement for the particle Signature of Registered Age of Trust Fund Contribution (). TORS: Delete ARA JT FOREST DR	ent	Date

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: APASARA MILLER MRS. 01/06/2004