

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90182 018 ***150.00

DOCUMENT # P02000027220 1. Entity Name CARDINAL TITLE COMPANY OF FLORIDA, INC.	
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Principal Place of Business 1241 BECKINHAM WAY ZEPHYRHILLS, FL 33543	Mailing Address 125 31ST ST BARBERTON, OH 44203
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CR2E034 (11/05)

4. FEI Number 42-1532406	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MARTINO, THOMAS 2708 W. KENNEDY BOULEVARD TAMPA, FL 33609

**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 _____
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINO, THOMAS 2708 W. KENNEDY BOULEVARD TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIMERS, CHERYL M 125 31ST STREET NW BARBERTON, OH 44203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HYNDE, BRADFORD K 125 31ST ST NW BARBERTON, OH 44203
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Cheryl M. Simers **CHERYL M. SIMERS** 4-7-06 330.825.9790
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Ongoing Phone #