

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90022 008 ***150.00

DOCUMENT # P02000086813

1. Entity Name
BONITA TITLE, INC.



Principal Place of Business
**8800 TERRENE COURT
105
BONITA SPRINGS, FL 34134**

Mailing Address
**8800 TERRENE COURT
105
BONITA SPRINGS, FL 34134**

50009519

2. Principal Place of Business
8800 TERRENE COURT
Suite, Apt. #, etc.
SUITE 105
City & State
BONITA SPRINGS FL
Zip
34135 Country

3. Mailing Address
8800 TERRENE COURT
Suite, Apt. #, etc.
SUITE 105
City & State
BONITA SPRINGS FL
Zip
34135 Country

03312006 Chg-P CR2E034 (11/05)

4. FEI Number
56-2527367 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**MORTENSEN, ANDREW G
8800 TERRENE COURT
105
BONITA SPRINGS, FL 34134**

7. Name and Address of New Registered Agent
Name
MORTENSEN, ANDREW G
Street Address (P.O. Box Number is Not Acceptable)
8800 TERRENE COURT
SUITE 105
City
BONITA SPRINGS FL Zip Code
34135

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 **ANDREW G. MORTENSEN** **3-31-06**
Signature, typed or printed name of registered agent and date 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	DV TOOLE, TIMOTHY D 8800 TERRENE COURT, #105 BONITA SPRINGS, FL 34134 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MORTENSEN, ANDREW G 8800 TERRENE COURT, #105 BONITA SPRINGS, FL 34134 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEANGELIS, JOHN M 8800 TERRENE COURT, #105 BONITA SPRINGS, FL 34134 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAMOND, DAVID B 8800 TERRENE COURT, #105 BONITA SPRINGS, FL 34134 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TOOLE, TIMOTHY D. 8800 TERRENE COURT, #105 BONITA SPRINGS FL 34135 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MORTENSEN, ANDREW G. 8800 TERRENE COURT, #105 BONITA SPRINGS FL 34135 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEANGELIS, JOHN M 8800 TERRENE COURT, #105 BONITA SPRINGS FL 34135 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAMOND, DAVID B. 8800 TERRENE COURT, #105 BONITA SPRINGS FL 34135 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **ANDREW G. MORTENSEN** **3/31/06** **239-948-2109**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

ATTACHMENT

500095-19

~~#P02000086813~~

FYI —

CHANGE IN

ZIP CODE

ONLY