2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State
04-04-2008 90021 024 ***150.00

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1. Entity Name
BONITA TITLE, INC.

40058953

04022008 Chg-P CR2E034 (12/06)

Principal Place of Business	Mailing Address
8800 TERRENE COURT SUITE 105 BONITA SPRINGS, FL 34135	8800 TERRENE COURT SUITE 105 BONITA SPRINGS, FL 34135

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
24851 S. TAMIAMI TRAIL	24851 S. TAMIAMI TRAIL
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BONITA SPRINGS FL	City & State: BONITA SPRINGS FL
Zip: 34134 Country: USA	Zip: 34134 Country: USA

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	7. Name and Address of New Registered Agent
MONTENDSEN, ANDREW G 8800 TERRENE COURT SUITE 105 BONITA SPRINGS, FL 34135	Name: MORTENSEN, ANDREW G Street Address (P.O. Box Number is Not Acceptable): 24851 S. TAMIAMI TRAIL City: BONITA SPRINGS FL Zip Code: 34134

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, PRES. DATE: 4/2/08
(Signature, name or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV TOOLE, TIMOTHY D 8800 TERRENE CT., SUITE 105 BONITA SPRINGS, FL 34135	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP MORTENSEN, ANDREW G 8800 TERRENE CT., SUITE 105 BONITA SPRINGS, FL 34135	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEANGELIS, JOHN M 8800 TERRENE CT., SUITE 105 BONITA SPRINGS, FL 34135	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DIAMOND, DAVID B 8800 TERRENE CT., SUITE 105 BONITA SPRINGS, FL 34135	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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, PRES. 4/2/08 239-948-2109
SIGNATURE AND TITLE OR PRINTED NAME OF ACTING OFFICER OR DIRECTOR — Date — Daytime Phone #