

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000096024

**FILED**  
**Oct 03, 2011**  
**Secretary of State**

**Entity Name:** BANKERS TITLE OF THE NATURE COAST, INC.

**Current Principal Place of Business:**

1627 N YOUNG BLVD  
CHIEFLAND, FL 32626

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1260  
OLD TOWN, FL 32680

**New Mailing Address:**

**FEI Number:** 37-1437381

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUTHRIE, SCOTT  
1627 N YOUNG BLVD  
CHIEFLAND, FL 32626 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:** SCOTT GUTHRIE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** DRUMMOND, GRAY  
**Address:** 1627 N YOUNG BLVD  
**City-St-Zip:** CHIEFLAND, FL 32626

**Title:** VICE  
**Name:** MARTIN, JERRY  
**Address:** 1627 N YOUNG BLVD  
**City-St-Zip:** CHIEFLAND, FL 32626

**Title:** S/T  
**Name:** GUTHRIE, SCOTT  
**Address:** 1627 N YOUNG BLVD  
**City-St-Zip:** CHIEFLAND, FL 32626

I hereby 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 all other like empowered.

**SIGNATURE:** SCOTT GUTHRIE

S/T

10/03/2011

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

\_\_\_\_\_  
Date