## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000097384

Entity Name: FLORIDA TITLE SERVICES & ESCROW, INC.

FILED Oct 17, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

**Current Principal Place of Business:** New Principal Place of Business:

12555 ORANGE DRIVE 12555 ORANGE DRIVE SUITE 265

SUITE 3A5 **DAVIE, FL 33330** DAVIE, FL 33330

**Current Mailing Address:** New Mailing Address:

12555 ORANGE DRIVE 12555 ORANGE DRIVE SUITE 265 SUITE 3A

DAVIE, FL 33330 **DAVIE, FL 33330** US US

FEI Number: 75-3082580 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SAMMARCO, VINCENT T GUERRIERI, DANIEL

9141 TAFT STREET 2500 WESTON ROAD, SUITE 103 PEMBROKE PINES, FL 33024 US WESTON, FL 33331

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: DANIEL GUERRIERI 10/17/2006

> Electronic Signature of Registered Agent Date

> > Title:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete

NAPLES, TRACEY Name: Name: NAPLES, TRACEY 12555 ORANGE DRIVE, SUITE 265 12555 ORANGE DRIVE, SUITE 3A Address: Address:

City-St-Zip: **DAVIE, FL 33330** City-St-Zip: **DAVIE, FL 33330** 

Title: Title: (X) Change ( ) Addition ( ) Delete

CONTRONE-RESTAINO, PATRICIA Name: Name: CONTRONE-RESTAINO, PATRICIA 12555 ORANGE DRIVE, SUITE 265 Address: 12555 ORANGE DRIVE, SUITE 3A Address:

**DAVIE, FL 33330 DAVIE, FL 33330** City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Ρ SIGNATURE: PATRICIA CONTRONE-RESTAINO 10/17/2006