

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098064

Entity Name: AVALON TITLE, INC.

FILED  
Jan 08, 2007  
Secretary of State

## Current Principal Place of Business:

621 CAPE CORAL PKWY EAST SUITE 19  
CAPE CORAL, FL 33904

## New Principal Place of Business:

6810 SHOPPES AT PLANTATION DR  
SUITE 5  
FORT MYERS, FL 33912

## Current Mailing Address:

621 CAPE CORAL PKWY EAST SUITE 19  
CAPE CORAL, FL 33904

## New Mailing Address:

6810 SHOPPES AT PLANTATION DR  
STE 5  
FORT MYERS, FL 33912

FEI Number: 02-0642019

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COTTRELL, WARCHOL, MERCHAND, BUCKLEY & POH  
1633 SE 47TH TER  
CAPE CORAL, FL 33904 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: COYNE, LINDA S  
Address: 621 CAPE CORAL PKWY EAST SUITE 19  
City-St-Zip: CAPE CORAL, FL 33904

Title: DVS ( ) Delete  
Name: PETITHOMME, YVES  
Address: 621 CAPE CORAL PKWY EAST SUITE 19  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: COYNE, LINDA S  
Address: 6810 SHOPPES AT PLANTATION DR STE 5  
City-St-Zip: FORT MYERS, FL 33912

Title: DVS (X) Change ( ) Addition  
Name: PETITHOMME, YVES  
Address: 6810 SHOPPES AT PLANTATION DR STE 5  
City-St-Zip: FORT MYERS, FL 33912

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.

SIGNATURE: LINDA S COYNE

PRES

01/08/2007

Electronic Signature of Signing Officer or Director

Date