

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 08, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000098885**

1. Entity Name  
**COCO TITLE COMPANY**



Principal Place of Business  
 2300 PALM BEACH LAKES BLVD.  
 SUITE 305  
 WEST PALM BEACH, FL 33409

Mailing Address  
 2300 PALM BEACH LAKES BLVD.  
 SUITE 305  
 WEST PALM BEACH, FL 33409



01032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **90-0053487** Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**BOYCHUK, PATRICIA L**  
**8628 PLUM CAY**  
**WEST PALM BEACH, FL 33411**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE **D**  
 NAME **BOYCHUK, PATRICIA L**  
 STREET ADDRESS **8628 PLUM CAY**  
 CITY-ST-ZIP **WEST PALM BEACH, FL 33411**

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 01/09/07-80016-024 150.00

**DO NOT WRITE IN THIS SPACE**

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: Patricia L Boychuk 01/05/2007 (561) 686-1144  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #