## 2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000100031

Entity Name: WATSON TITLE SERVICES OF N. FL., INC.

FILED Jun 27, 2011 Secretary of State

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

175 HAMPTON POINT DRIVE 11226 SAN JOSE BLVD.

SUITE 2 SUITE 2

SAINT AUGUSTINE, FL 32092 JACKSONVILLE, FL 32223

Current Mailing Address: New Mailing Address:

175 HAMPTON POINT DRIVE 11226 SAN JOSE BLVD.

SUITE 2 SUITE 2

SAINT AUGUSTINE, FL 32092 JACKSONVILLE, FL 32223

FEI Number: 14-1848508 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:

WATSON, G. KEITH WATSON, WILLIAM A JR 208 PONTE VEDRA PARK DRIVE 7821 DEERCREEK CLUB RD.

SUITE 101 SUITE 200

PONTE VEDRA BEACH, FL 32082 US JACKSONVILLE, FL 322563698 US

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: WILLIAM A WATSON, JR 06/27/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: C

Name: WATSON, WILLIAM A JR

Address: 7821 DEERCREEK CLUB RD SUITE 200

City-St-Zip: JACKSONVILLE, FL 322563698

Title: P

Name: ROMO, ALISHA R

Address: 11226 SAN JOSE BLVD SUITE 2 City-St-Zip: JACKSONVILLE, FL 32223

Title: D

Name: BONGIORNO, MARY A

Address: 615 HWY A1A

City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title:

Name: FORMAN, ROBERT E

Address: 7821 DEERCREEK CLUB RD SUITE 200

City-St-Zip: JACKSONVILLE, FL 32256

Title:

Name: SHAMBLIN, DONALD
Address: 8465 MERCHANTS WAY
City-St-Zip: JACKSONVILLE, FL 32222

Title:

 Name:
 PITTMAN, MARGARET D

 Address:
 3505 US 1 SOUTH

 City-St-Zip:
 ST. AUGUSTINE, FL 32086

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: WILLIAM A WATSON, JR C 06/27/2011