## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000071689

Entity Name: TITLE RESOURCES OF GAINESVILLE, INC.

FILED Jan 16, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2135 NW 40TH TERR SUITE C GAINESVILLE, FL 32605				2135 NW 40TH TERR SUITE D GAINESVILLE, FL 32605			
Current Mailing Address:				New Mailing Address:			
2135 NW 40TH TERR SUITE C GAINESVILLE, FL 32605			2135 NW 40TH TERR SUITE D GAINESVILLE, FL 32605				
FEI Number: 20-0061407 FEI Number Applied For ( ) FEI Number			mber Not Applicable ( ) Certificate of Status Desired ( )				
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PREVATT, KATHY 2135 NW 40TH TERR SUITE C GAINESVILLE, FL 32605 US				PREVATT, KATHY 2135 NW 40TH TERR SUITE D GAINESVILLE, FL 32605 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: K. PREVATT				01/16/2007			
	Electroni	c Signature of Registered Agent	t			Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P/D ( ) I PREVATT, KATH P. O. BOX 14009 GAINESVILLE, F	95		Title: Name: Address: City-St-Zip:	()	Change()Addition	
Title: Name: Address: City-St-Zip:	VP/D ( ) I MARTIN, GREGO 6111 SW 85TH S GAINESVILLE, F	ST.		Title: Name: Address: City-St-Zip:	VPSD (X) MARTIN, GREG 6111 SW 85TH GAINESVILLE,	ST.	
Title: Name: Address: City-St-Zip:	D () I DELANEY, PHILI 429 NW 24TH ST GAINESVILLE, F	TREET		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP/D ( ) I RAABE, CHARLE 160 ANNA GOOD LATROBE, PA 1	ES R DMAN ROAD		Title: Name: Address: City-St-Zip:	VPD (X) RAABE, CHARL 160 ANNA GOO LATROBE, PA	DMAN ROAD	
Title: Name: Address: City-St-Zip:	S (X) EFFEREN, SHEI 504 NW 93RD W GAINESVILLE, F	VAY		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () I BISSINNAR, JOS 2841 SW 13TH S GAINESVILLE, F	STREET, H232		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	

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: KATHY PREVATT PD 01/16/2007