

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130492

FILED
Jan 05, 2007
Secretary of State

Entity Name: ALLEGIANCE TITLE OF FLORIDA'S WEST COAST, INC.

Current Principal Place of Business:

3501 SOUTH DEL PRADO BLVD
SUITE 310
CAPE CORAL, FL 33904

New Principal Place of Business:

229 NORTH DEL PRADO BLVD
SUITE 9-10
CAPE CORAL, FL 33990

Current Mailing Address:

3501 SOUTH DEL PRADO BLVD
SUITE 310
CAPE CORAL, FL 33904

New Mailing Address:

229 NORTH DEL PRADO BLVD
SUITE 9-10
CAPE CORAL, FL 33990

FEI Number: 20-0382442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSMAL SANCHEZ
3501 SOUTH DEL PRADO BLVD
SUITE 310
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

OSMAL SANCHEZ
229 NORTH DEL PRADO BLVD
SUITE 9-10
CAPE CORAL, FL 33990 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:

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: HIRSCH, MARGARET A
Address: 2114 S.W. 40TH STREET
City-St-Zip: CAPE CORAL, FL 33914

Title: P () Delete
Name: HIRSCH, MICHAEL S
Address: 2114 S.W. 40TH STREET
City-St-Zip: CAPE CORAL, FL 33914

Title: S/T () Delete
Name: SANCHEZ, OSMAL
Address: 3501 SOUTH DEL PRADO BLVD.
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HIRSCH, MARGARET A
Address: 229 NORTH DEL PRADO BLVD STE 9-10
City-St-Zip: CAPE CORAL, FL 33990

Title: P (X) Change () Addition
Name: HIRSCH, MICHAEL S
Address: 229 NORTH DEL PRADO BLVD STE 9-10
City-St-Zip: CAPE CORAL, FL 33990

Title: S/T (X) Change () Addition
Name: SANCHEZ, OSMAL
Address: 229 NORTH DEL PRADO BLVD STE 9-10
City-St-Zip: CAPE CORAL, FL 33990

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: OSMAL SANCHEZ

S/T

01/05/2007

Electronic Signature of Signing Officer or Director

Date