2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P04000016153

Entity Name: BUILDERS TITLE SERVICE, INC.

FILED Sep 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2804 DEL PRADO BLVD SUITE 106 CAPE CORAL, FL 33094 **New Mailing Address: Current Mailing Address:** 2804 DEL PRADO BLVD SUITE 106 CAPE CORAL, FL 33904 FEI Number: 30-4223944 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: SHAFFER, STEVEN O 2804 DEL PRADO BLVD SUITE 106 CAPE CORAL, FL 33904 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.

OFFICERS AND DIRECTORS:

SARASOTA, FL 34242

SIGNATURE:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: () Delete Title: (X) Change () Addition SHAFFER, FRANK O SHAFFER, FRANK O Name: Name: 11875 KING JAMES CT 2804 DEL PRADO BLVD., SUITE 106 Address: Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: CAPE CORAL, FL 33904 () Delete Title: VD Title: (X) Change () Addition Name: SHAFFER, STEVEN 0 Name: SHAFFER, STEVEN O 1806 SW 12TH TERRACE 2804 DEL PRADO BLVD., SUITE 106 Address: Address: CAPE CORAL, FL 33991 CAPE CORAL, FL 33904 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition KEBER, VINCENT Name: Name: 3906 NORTH SHELL ROAD Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: STEVEN O. SHAFFER PL 09/07/2005