

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016153

FILED  
Jan 18, 2007  
Secretary of State

Entity Name: BANYAN TITLE AND ESCROW, INC.

## Current Principal Place of Business:

4808 EVANS AVENUE  
SUITE 206  
FORT MYERS, FL 33901

## New Principal Place of Business:

2503 DEL PRADO BLVD  
SUITE 503  
CAPE CORAL, FL 33904

## Current Mailing Address:

4808 EVANS AVENUE  
SUITE 206  
FORT MYERS, FL 33901

## New Mailing Address:

2503 DEL PRADO BLVD  
SUITE 503  
CAPE CORAL, FL 33904

FEI Number: 42-1615854

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAFFER, STEVEN O  
4808 EVANS AVENUE  
SUITE 206  
FORT MYERS, FL 33901 US

## Name and Address of New Registered Agent:

SHAFFER, STEVEN O  
2503 DEL PRADO BLVD  
SUITE 503  
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.

SIGNATURE:

01/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: SHAFFER, STEVEN O  
Address: 4808 EVANS AVE., SUITE 206  
City-St-Zip: FORT MYERS, FL 33901

Title: VP ( ) Delete  
Name: KEBER, VINCENT  
Address: 4808 EVANS AVE., SUITE 206  
City-St-Zip: FORT MYERS, FL 33901

Title: SEC (X) Delete  
Name: SHAFFER, STEVEN O  
Address: 4808 EVANS AVE., SUITE 206  
City-St-Zip: FORT MYERS, FL 33901

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SHAFFER, STEVEN O  
Address: 2503 DEL PRADO BLVD, SUITE 503  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP (X) Change ( ) Addition  
Name: KEBER, VINCENT  
Address: 2503 DEL PRADO BLVD, SUITE 503  
City-St-Zip: CAPE CORAL, FL 33904

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STEVEN O. SHAFFER

PRES

01/18/2007

Electronic Signature of Signing Officer or Director

Date