

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025315

FILED  
Jan 27, 2006  
Secretary of State

Entity Name: ALPHA TITLE INSURANCE CORP

## Current Principal Place of Business:

901 S STATE RD 7  
STE 200  
HOLLYWOOD, FL 33023

## New Principal Place of Business:

## Current Mailing Address:

901 S STATE RD 7  
STE 200  
HOLLYWOOD, FL 33023

## New Mailing Address:

FEI Number: 20-0709603

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRISON, DARRAM  
3601 INVERRARY BLVD W  
LAUDERHILL, FL 33319 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HARRISON, DARRAM  
Address: 3601 INVERRARY BLVD W  
City-St-Zip: LAUDERHILL, FL 33319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DARRAM HARRISON

P

01/27/2006

Electronic Signature of Signing Officer or Director

Date