2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039222

Title:

Name:

Address:

City-St-Zip:

Entity Name: EASTERN TITLE & CLOSING SERVICES, INC.

FILED Feb 13, 2007 Secretary of State

Current Principal Place of Business:		New Principal Pla	New Principal Place of Business:		
262 E MERRITT ISLAND CAUSEWAY		262 F MFRRITT IS	262 E MERRITT ISLAND CAUSEWAY		
JNIT 18		UNIT 15			
MERRITT ISLAND, FL 32952		MERRITT ISLAND, FL 32952			
Current Mailing Address:		New Mailing Address:			
262 E MERRITT ISLAND CAUSEWAY		262 E MERRITT ISLAND CAUSEWAY			
UNIT 18 MERRITT ISLAND, FL 32952		UNIT 15 MERRITT ISLAND, FL 32952			
MEKKIIII	ISLAND, FL	32952	MERRII I ISLAND,	FL 32952	
FEI Number:	20-0809482	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
The above n the State	e of Florida. ´ RE:				
n the State	e of Florida. RE: Electro	nic Signature of Registered <i>F</i>		ered office or registered agent, or both Date	
The above In the State SIGNATUR	e of Florida. RE: Electro				
The above in the State SIGNATUF Election Can	e of Florida. RE: Electro	nic Signature of Registered <i>F</i> ig Trust Fund Contribution().	ngent		
The above in the State SIGNATUF Election Can	e of Florida. RE: Electro npaign Financir S AND DIREC PD (JACKVONY, L' 2604 KENDRIG	nic Signature of Registered A og Trust Fund Contribution (). CTORS:) Delete DUIS V III	ngent	Date	
The above in the State SIGNATURE Election Can OFFICERS Title: Name: Address: City-St-Zip:	e of Florida. RE: Electro Inpaign Financir S AND DIRECT PD (JACKVONY, L- 2604 KENDRIG WEST MELBO	nic Signature of Registered A g Trust Fund Contribution (). CTORS:) Delete DUIS V III CK COURT	Agent ADDITIONS/CHAN Title: Name: Address:	Date NGES TO OFFICERS AND DIRECTO	
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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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LOUIS V. JACKVONY III PRES 02/13/2007

() Delete

GARIEPY, LLOYD R

WOONSOCKET, RI 02895

198 DAWN BLVD

() Change () Addition