

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2005 8:00 am**  
**Secretary of State**

04-21-2005 90244 006 \*\*\*150.00

**DOCUMENT # P04000056160**

1. Entity Name  
**SUNCOAST TITLE OF S.W. FLORIDA, INC.**



**40064894**

Principal Place of Business

Mailing Address

**983 N. COLLIER BLVD.  
MARCO ISLAND, FL 34145**

**983 N. COLLIER BLVD.  
MARCO ISLAND, FL 34145**

2. Principal Place of Business

3. Mailing Address

**280 South Collier Blvd.**

**280 S. Collier Blvd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**#606**

**#606**

City & State

City & State

**Marco Island, FL**

**Marco Island, FL**

Zip

Country

Zip

Country

**34145**

**Collier**

**34145**

**Collier**

04122005

Chg-P

CR2E034 (10/03)

4. FEI Number

**20-0956239**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LIY, LOURDES**

**983 N. COLLIER BLVD.**

**MARCO ISLAND, FL 34145**

Name

**Nichole Signorelli**

Street Address (P.O. Box Number is Not Acceptable)

**280 S. Collier Blvd. #606**

**Marco Island,**

**FL**

**Zip Code 34145**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**Nichole Signorelli**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**April 13, 2005**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PS

**WILLINGHAM, SUSAN M**

**983 N. COLLIER BLVD.**

**MARCO ISLAND, FL 34145**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VT

**CHILDS, DONALD G**

**983 N. COLLIER BLVD.**

**MARCO ISLAND, FL 34145**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Susan M. Willingham**

**April 13, 2005 239-394-6454**