2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# P04000059763

Entity Name: TREASURE COAST TITLE SERVICES, INC.

Current Principal Place of Business:

522 SW PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

522 SW PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34953

New Mailing Address:

PO BOX 8089
PORT ST LUCIE, FL 34985

FEI Number: 20-0986688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUBAIN, IMAD S
522 SW PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34953 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: D ( ) Delete
Name: QUBAIN, IMAD S
Address: 122 SW PORT ST LUCIE BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T ( ) Change (X) Addition
Name: JAVIER, RHODA
Address: 522 SW PORT ST LUCIE BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: P ( ) Change (X) Addition
Name: PINZONE, BARBARA
Address: 522 SW PORT ST LUCIE BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

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: RHODA JAVIER T 04/26/2006

Electronic Signature of Signing Officer or Director — Date