

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073819

Entity Name: OKALOOSA WALTON TITLE, INC.

FILED
Jan 27, 2006
Secretary of State

Current Principal Place of Business:

4481 LEGENDARY DRIVE STE 200
DESTIN, FL 32541

New Principal Place of Business:

4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541

Current Mailing Address:

4481 LEGENDARY DRIVE STE 200
DESTIN, FL 32541

New Mailing Address:

4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541

FEI Number: 20-1102349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELMICH, KEVIN M
4481 LEGENDARY DRIVE STE 200
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

HELMICH, KEVIN M ESQUIRE
4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541 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: KEVIN M. HELMICH

01/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HELMICH, KEVIN M
Address: 4481 LEGENDARY DRIVE STE 200
City-St-Zip: DESTIN, FL 32541

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: HELMICH, KEVIN M
Address: 4481 LEGENDARY DRIVE, SUITE 200
City-St-Zip: DESTIN, FL 32541

Title: PSTD () Change (X) Addition
Name: HELMICH, JENNIFER A
Address: 118 OLD SOUTH DRIVE
City-St-Zip: CRESTVIEW, FL 32536

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: JENNIFER HELMICH

PSTD

01/27/2006

Electronic Signature of Signing Officer or Director

Date