2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129627

Entity Name: WATKINSON TITLE, INC.

FILED Apr 05, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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8024 GOLDEN SANDS DRIVE ORLANDO, FL 32819 US

Current Mailing Address: New Mailing Address:

8024 GOLDEN SANDS DRIVE ORLANDO, FL 32819 US

FEI Number: 20-1618119 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 US
WATKINSON, CRAIG J
8024 GOLDEN SANDS DRIVE
ORLANDO, FL 32819 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: CRAIG J WATKINSON 04/05/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition WATKINSON, CRAIG WATKINSON, CRAIG J Name: Name: 8024 GOLDEN SANDS DRIVE 8024 GOLDEN SANDS DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: ORLANDO, FL 32819 US

Title: PRES (X) Delete Title: () Change () Addition

 Name:
 WATKINSON, CRAIG J
 Name:

 Address:
 8024 GOLDEN SANDS DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 DOLAN, LILIANA V
 Name:

 Address:
 90 COLWELL ROAD
 Address:

 City-St-Zip:
 BURRILLVILLE, RI 02830
 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: CRAIG J WATKINSON D 04/05/2007