

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000129862

Entity Name: PALM TITLE ASSOCIATES, INC.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1591 HAYLEY LANE, SUITE 202  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

**Current Mailing Address:**

1591 HAYLEY LANE, SUITE 202  
FORT MYERS, FL 33907 US

**New Mailing Address:**

FEI Number: 20-1680278

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DREXLER-HENSLEY, NANCY  
1591 HAYLEY LANE, SUITE 202  
FORT MYERS, FL 33907 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: DREXLER-HENSLEY, NANCY PRES  
Address: 2247 28TH STREET  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D  
Name: BREDICEAN, MAGDALENA VP  
Address: 1623 SE 6TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33909

I hereby 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 all other like empowered.

SIGNATURE: NANCY DREXLER HENSLEY

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01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date