2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2005
Secretary of State

DOCUMENT# P04000151537

Entity Name: FIDELITY TITLE & TRUST INC.

Current Principal Place of Business:

8252 DOMINICA PLACE
WELLINGTON, FL 33414

New Principal Place of Business:

11555 HERON BAY BLVD.
200
CORAL SPRINGS, FL 33076

Current Mailing Address:

8252 DOMINICA PLACE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 20-1842310 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHERMAN, DAVID A
8252 DOMINICA PLACE
WELLINGTON, FL 33414 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SHERMAN, DAVID A
Address: 8252 DOMINICA PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: VP ( ) Delete
Name: SHERMAN, DAVID A
Address: 8252 DOMINICA PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: S ( ) Delete
Name: SHERMAN, DAVID A
Address: 8252 DOMINICA PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: T ( ) Delete
Name: SHERMAN, DAVID A
Address: 8252 DOMINICA PLACE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: SHERMAN, BELKYS E
Address: 8252 DOMINICA PLACE
City-St-Zip: WELLINGTON, FL 33414

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID SHERMAN PRES 05/26/2005
Electronic Signature of Signing Officer or Director Date