

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108878

FILED
Jan 30, 2008
Secretary of State

Entity Name: TOWNCENTER TITLE OF PC, INC.

Current Principal Place of Business:

1032 TAMIAMI TRAIL
UNIT 7
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

989 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953

Current Mailing Address:

1032 TAMIAMI TRAIL
UNIT 7
PORT CHARLOTTE, FL 33953

New Mailing Address:

989 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953

FEI Number: 20-3259943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHLE, GARY A ESQ
99 NESBIT ST.
PUNTA GORDA, FL 33950 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: DP () Delete
Name: BESHEARS, MARC
Address: 989 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: DVST () Delete
Name: DEGROSS, DEAN
Address: 989 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARC BESHEARS

DP

01/30/2008

Electronic Signature of Signing Officer or Director

_____ Date