

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2007 8:00 am
Secretary of State

08-24-2007 90024 032 ***150.00

DOCUMENT # P05000109724	
1. Entity Name INTERNATIONAL LAND & TITLE CORPORATION	

Principal Place of Business 1101 17TH STREET PALM HARBOR, FL 34683	Mailing Address 1101 17TH STREET PALM HARBOR, FL 34683
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2. Principal Place of Business No P.O. Box # 2255 Glades Road	3. Mailing Address 2255 Glades Road
Suite, Apt. #, etc. Suite 324A	Suite, Apt. #, etc. Suite 324A
City & State Boca Raton, Florida	City & State Boca Raton, Florida
Zip 33431	Country U.S.A.

40130119 ✓

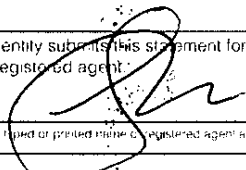


05022007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent VOGEL, SARAH S 1101 17TH STREET PALM HARBOR, FL 34683	
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7. Name and Address of New Registered Agent	
Name Sarah S. Vogel	
Street Address (P.O. Box Number is Not Acceptable) 2255 Glades Road, Ste 324 A	
City Boca Raton	FL Zip Code 33431

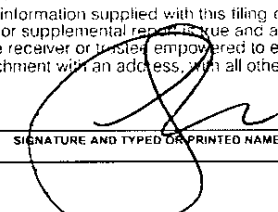
8. The above named entity submits this statement for the purpose of **SARAH S. VOGEL** as its officer or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **5/1/2007**

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	P VOGEL, SARAH S 1101 17TH STREET PALM HARBOR, FL 34683 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	President Vogel, Sarah S. 2255 Glades Road, Suite 324 A Boca Raton, FL 33431 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VP CROZON, MARYVONNE 2255 GLADES ROAD, SUITE 324A BOCA RATON, FL 33431 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:  **SARAH S. VOGEL** DATE **5/1/2007**