

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112542

FILED  
Mar 31, 2007  
Secretary of State

Entity Name: NOTICE TO OWNER SERVICES, INC.

## Current Principal Place of Business:

350 E LAS OLAS BLVD SUITE 1700  
FT LAUDERDALE, FL 33301

## New Principal Place of Business:

7992 SW 187 AVE  
DUNNELLON, FL 34432

## Current Mailing Address:

350 E LAS OLAS BLVD SUITE 1700  
FT LAUDERDALE, FL 33301

## New Mailing Address:

7992 SW 187 AVE  
DUNNELLON, FL 34432

FEI Number: 20-3304125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAHADY, THOMAS R  
350 E LAS OLAS BLVD SUITE 1700  
FT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

SHAHADY, THOMAS R  
350 E LAS OLAS BLVD STE 1700  
FT LAUDERDALE, FL 33301 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:

03/31/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SHAHADY, THOMAS R  
Address: 350 E LAS OLAS BLVD SUITE 1700  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STEIN, EILEEN M  
Address: 7992 SW 187 AVE  
City-St-Zip: DUNNELLON, FL 34432

Title: VP ( ) Change (X) Addition  
Name: MCGOVERN, KELLIE  
Address: 7992 SW 187 AVE  
City-St-Zip: DUNNELLON, FL 34432

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: KELLIE MCGOVERN

VP

03/31/2007

Electronic Signature of Signing Officer or Director

Date