2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **Secretary of State DOCUMENT # P05000120568** 02-20-2006 90049 045 \*\*\*150.00 1. Entity Name CORNERSTONE MARKET TITLE SERVICES, INC. Principal Place of Business Mailing Address PP003010 110 S FLETCHER AVENUE MAYO FL 32066 PO BOX 392 MAYO FL 32066 Mailing Address 2. Principal Place of Business 1515 Suite, Apt. #, etc. Suite, Apt. #. etc. 1st MOORE CR2E034 (10/05) City & State Applied For 32066 Not Apolicable Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NEILL, DOROTHY Y Street Address (P.O. Box Number is Not Acceptable) **573 NÉ CASTAGNA LANE** MAYO FL 32066 City Zip Code 8. The above named greity submits this statement for the purgose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of fegis red agent SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 OFFICERS AND DIRECTORS 11. nne ☐ Delete nne ☐ Change Addition NAME NEILL, HEATHER M NAME 892 NE CANDY LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAYO FL 32066 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NEILL, DOROTHY Y NAME STREET ADDRESS **573 CASTAGNA LANE** STREET ADDRESS CITY-ST-ZIP MAYO FL 32066 CITY-ST-ZIP Onderbe FILLE 11715 ☐ Change - - E Addition NAME NEILL, BILLI JO PLAME STREET ADDRESS STREET ADDRESS 1118 SE CR 416 CITY-SI-ZP CITY-ST-ZIP BRANFORD FL 32080 DILE ☐ Detete TITL F Change Addition O'STEEN, LARRY L NAME NAME STREET ADDRESS 357 SE CR 416 STREET ADDRESS MAYO FL 32066 CITY-ST-71P CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY - ST - ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 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 upport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactment, with an address, with all officer like empowered. SIGNATURE: OF BIGHING OFFICER OR DIRECTOR Devemo Prone 6

FILED

Mar 17, 2006 8:00 am



Division of Corporations

February 22, 2006

CORNERSTONE MARKET TITLE SERVICES, INC. PO BOX 1515
MAYO, FL 32066

Subject: CORNERSTONE MARKET TITLE SERVICES, INC.

Reference Number:

P05000120568

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CJ ANNUAL REPORTS SECTION