

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162853

FILED
Feb 11, 2008
Secretary of State

Entity Name: NEXUS TITLE & ASSOCIATES CORP.

Current Principal Place of Business:

222 S. WESTMONTE DRIVE
SUITE 206
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

8810 COMMODITY DRIVE
SUITE 16, UNIT 1
ORLANDO, FL 32819 OR

Current Mailing Address:

222 S. WESTMONTE DRIVE
SUITE 206
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

8810 COMMODITY DRIVE
SUITE 16, UNIT 1
ORLANDO, FL 32819 OR

FEI Number: 20-3939006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, MARIA A
222 S. WESTMONTE DRIVE
SUITE 206
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

COLLINS, MARIA A
8810 COMMODITY DRIVE
SUITE 16, UNIT 1
ORLANDO, FL 32819 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: MARIA A. COLLINS

02/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PENNEY, THOMAS E
Address: 222 S. WESTMONTE DRIVE, SUITE 206
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP () Delete
Name: PERRONE, DEAN
Address: 222 S. WESTMONTE DRIVE, SUITE 206
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: ST () Delete
Name: COLLINS, MARIA A
Address: 222 S. WESTMONTE DRIVE, SUITE 206
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PENNEY, THOMAS E
Address: 8810 COMMODITY DRIVE
City-St-Zip: ORLANDO, FL 32819 OR

Title: VP (X) Change () Addition
Name: PERRONE, DEAN
Address: 8810 COMMODITY DRIVE
City-St-Zip: ORLANDO, FL 32819 OR

Title: ST (X) Change () Addition
Name: COLLINS, MARIA A
Address: 8810 COMMODITY CIRCLE
City-St-Zip: ORLANDO, FL 32819 OR

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: MARIA A. COLLINS

ST

02/11/2008

Electronic Signature of Signing Officer or Director

Date