

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000168444

FILED
Apr 15, 2009
Secretary of State

Entity Name: PROFESSIONAL TITLE EXAMINERS & ABSTRACTING COMPANY, INC.

Current Principal Place of Business:

15951 S.W. 41ST STREET
SUITE #800
WESTON, FL 33331

New Principal Place of Business:

11380 LAKE SHORE DR
COOPER CITY, FL 33026

Current Mailing Address:

15951 S.W. 41ST STREET
SUITE #800
WESTON, FL 33331

New Mailing Address:

PO BOX 260277
PEMBROKE PINES, FL 33026

FEI Number: 20-4118296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, MORRIE I ESQ.
2450 HOLLYWOOD BLVD
SUITE 100
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

MARTINEZ, CLARA R
11380 LAKE SHORE DR
COOPER CITY, FL 33026 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: CLARA R MARTINEZ

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARITNEZ, CLARA R
Address: 15951 S.W. 41ST STREET, SUITE 800
City-St-Zip: WESTON, FL 33331

Title: VP () Delete
Name: MARTINEZ, JULIEANN C
Address: 15951 SW 41 ST, SUITE 800
City-St-Zip: WESTON, FL 33331

Title: SEC () Delete
Name: VENTURA, GIANNA M
Address: 15951 SW 41 ST, SUITE 800
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARITNEZ, CLARA R
Address: PO BOX 260277
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP (X) Change () Addition
Name: MARTINEZ, JULIEANN C
Address: PO BOX 260277
City-St-Zip: PEMBROKE PINES, FL 33026

Title: SEC (X) Change () Addition
Name: VENTURA, GIANNA M
Address: PO BOX 260277
City-St-Zip: PEMBROKE PINES, FL 33026

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: CLARA R. MARTINEZ

D

04/15/2009

Electronic Signature of Signing Officer or Director

Date