

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000060750

FILED
Jan 19, 2007
Secretary of State

Entity Name: STATEWIDE TITLE AND ESCROW SERVICES, INC.

Current Principal Place of Business:

11330 S.E. FEDERAL HWY.
HOBE SOUND, FL 33455 US

New Principal Place of Business:

Current Mailing Address:

11330 S.E. FEDERAL HWY.
HOBE SOUND, FL 33455 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREGORY, JUDITH A
11330 S.E. FEDERAL HWY.
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GREGORY, JUDITH A
Address: 27 PECAN COURSE LOOP
City-St-Zip: OCALA, FL 34472 US

Title: VP () Delete
Name: GAGNE, MARC A
Address: 3815 38TH WAY
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: S () Delete
Name: JACKSON, WILLIAM T
Address: 1841 SMITH DR.
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: TRACY, JOHN S ESQ
Address: 1511 PROSPERITY FARMS RD STE 100
City-St-Zip: LAKE PARK, FL 33403

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: J STEPHEN TRACY

VP

01/19/2007

Electronic Signature of Signing Officer or Director

Date