

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000101262

1. Entity Name
BONDED BUILDERS TITLE SERVICES, INC.



FILED

2008 FEB 26 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02042008 Chg-P CR2E034 (12/06)

Principal Place of Business
11101 ROOSEVELT BLVD. N.
4TH FLOOR, LEGAL DEPT.
ST. PETERSBURG, FL 33716

Mailing Address
11101 ROOSEVELT BLVD. N.
4TH FLOOR, LEGAL DEPT.
ST. PETERSBURG, FL 33716

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number
20-5322350

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAIRE, NANCY C
11101 ROOSEVELT BLVD. N.
4TH FLOOR, LEGAL DEPT.
ST. PETERSBURG, FL 33716

7. Name and Address of New Registered Agent

Name
C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)
c/o C T Corporation System

1200 South Pine Island Road

City Plantation FL Zip Code 33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Connie Bryan **CONNIE BRYAN** **SPECIAL ASSISTANT SECRETARY** 300119105663 02/29/08-01010-005 #150.00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MARTZ, B. BENNETT 360 CENTRAL AVENUE SAINT PETERSBURG, FL 33701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WARD, WHIT 360 CENTRAL AVENUE SAINT PETERSBURG, FL 33701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEAD, HOWARD 360 CENTRAL AVENUE SAINT PETERSBURG, FL 33701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HUSSEMAN, EDWIN C 360 CENTRAL AVENUE SAINT PETERSBURG, FL 33701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEEHAN, DAVID K 360 CENTRAL AVENUE SAINT PETERSBURG, FL 33701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEEFER, BRAIN L 360 CENTRAL AVENUE SAINT PETERSBURG, FL 33701	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T Martz, B. Bradford 11101 Roosevelt Blvd. N. St. Petersburg, Florida 33716	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/S 1500 Kings Highway Port Charlotte, Florida 33980	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1500 Kings Highway Port Charlotte, Florida 33980	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	11101 Roosevelt Blvd. N. St. Petersburg, Florida 33716	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	11101 Roosevelt Blvd. N. St. Petersburg, Florida 33716	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Haire, Nancy C. 11101 Roosevelt Blvd. N. St. Petersburg, Florida 33716	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy C. Haire Nancy C. Haire, Asst. Secretary 2/8/2008 727-823-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

7/26/08

BONDED BUILDERS TITLE SERVICES, INC.

Exhibit to 2008 Annual Corporation Report

C	Brian J. Kesneck	11101 Roosevelt Blvd N	St. Petersburg, FL 33716
AVP	Mark E. Winkler	11101 Roosevelt Blvd N	St. Petersburg, FL 33716
AS	Stephanie D. Trudel	11101 Roosevelt Blvd N	St. Petersburg, FL 33716