

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066873

FILED
Feb 19, 2009
Secretary of State

Entity Name: TRADEWINDS TITLE GROUP INC.

Current Principal Place of Business:

151 SAWGRASS CORNERS DR
SUITE 103
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

151 SAWGRASS CORNERS DR
SUITE 103
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 26-0311372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

FRANKEL, ADAM S
151 SAWGRASS CORNERS DRIVE
103
PONTE VEDRA BEACH, FL 32082 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: ADAM FRANKEL

02/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MS () Delete
Name: HARLOW, SHANNON
Address: 151 SAWGRASS CORNERS DR STE 103
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS (X) Change () Addition
Name: FRANKEL, SHANNON
Address: 151 SAWGRASS CORNERS DR STE 103
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MR () Change (X) Addition
Name: FRANKEL, ADAM
Address: 151 SAWGRASS CORNERS DR STE 103
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

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: SHANNON FRANKEL

MRS.

02/19/2009

Electronic Signature of Signing Officer or Director

Date