2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000066873

Entity Name: TRADEWINDS TITLE GROUP INC.

FILED Nov 18, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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236 CANAL BLVD, STE 4 151 SAWGRASS CORNERS DRIVE PONTE VEDRA BEACH, FL 32082

204 B

PONTE VEDRA BEACH, FL 32082

Current Mailing Address: New Mailing Address:

236 CANAL BLVD, STE 4 151 SAWGRASS CORNERS DRIVE PONTE VEDRA BÉACH, FL 32082

204 B

PONTE VEDRA BEACH, FL 32082

FEI Number: 26-0311372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FRANKEL, SHANNON FRANKEL, PHYLLIS 236 CANAL BLVD. #4

151 SAWGRASS CORNERS DRIVE PONTE VEDRA BEACH, FL 32082 US 204 B

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: PHYLLIS FRANKEL 11/18/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS () Delete Title: (X) Change () Addition FRANKEL, SHANNON FRANKEL, PHYLLIS OWNER Name: Name:

151 SAWGRASS CORNERS DR STE 103 Address: 151 SAWGRASS CORNERS DR STE 204B Address:

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: () Delete Title: () Change (X) Addition Name: Name: HARPER, KATHRYN AGENT

Address: Address: 151 SAWGRASS CORNERS DRIVE STE 204B

PONTE VEDRA BEACH, FL 32082 City-St-Zip: City-St-Zip:

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: PHYLLIS FRANKEL MS 11/18/2009