## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000119255

Entity Name: GARDEN HOME TITLE, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

490 SAWGRASS CORPORATE PARKWAY, SUITE 330 4577 NOB HILL ROAD

SUNRISE, FL 33325 STE 206 SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

490 SAWGRASS CORPORATE PARKWAY, SUITE 330 4577 NOB HILL ROAD SUNRISE, FL 33325 STE 206

SUNRISE, FL 33351

FEI Number: 20-2524626 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:

SINGER, GARY
490 SAWGRASS CORPORATE PARKWAY, SUITE 330
SINGER, GARY
4577 NOB HILL ROAD

SUNRISE, FL 33325 US STE 206
SUNRISE, FL 33351 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: GARY SINGER 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PT (X) Change ( ) Addition

Name:SINGER, GARY MName:SINGER, GARY MAddress:490 SAWGRASS CORP PKWY, STE 330Address:4577 NOB HILL ROAD, STE 206

City-St-Zip: SUNRISE, FL 33325 City-St-Zip: SUNRISE, FL 33324

Title: T ( ) Delete Title: S (X) Change ( ) Addition

Name: STUEBER, WILLIAM Name: FOLLESE, DANIEL

Address: 490 SAWGRASS CORP PKWY, STE 330 Address: 4577 NOB HILL ROAD, STE 206

City-St-Zip: SUNRISE, FL 33325 City-St-Zip: SUNRISE, FL 33351

Title: S (X) Delete Title: ( ) Change ( ) Addition Name: FOLLESE, DANIEL Name:

 Name:
 FOLLESE, DANIEL
 Name:

 Address:
 490 SAWGRASS CORP PKWY, STE 330
 Address:

 City-St-Zip:
 SUNRISE, FL 33325
 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: GARY SINGER PRES 04/28/2009