

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000074811

FILED  
Mar 10, 2005  
Secretary of State

**Entity Name:** ANCHOR TITLE COMPANY OF PALM BEACH COUNTY

**Current Principal Place of Business:**

12773 W FOREST HILL BLVD  
SUITE 1201  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

12773 W FOREST HILL BLVD  
SUITE 1201  
WELLINGTON, FL 33414 US

**New Mailing Address:**

**FEI Number:** 65-0448318

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PORRO, HILDA M  
12773 W FOREST HILL BLVD  
SUITE 1201  
WELLINGTON, FL 33414 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:** D ( ) Delete  
**Name:** PORRO, HILDA M  
**Address:** 12773 W FOREST HILL BLVD SUITE 1201  
**City-St-Zip:** WELLINGTON, FL

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** HILDA M. PORRO

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03/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date