## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000048793

Entity Name: NOVA TITLE COMPANY

FILED Jan 26, 2006 Secretary of State

| •  |  |            |                       |         |  |                            |  |  |
|--|--|------------|-----------------------|---------|--|----------------------------|--|--|
| Current Principal Place of Business:   |  |            |                       |         | New Principal Place of Business:   |                            |  |  |
| STE 402  | ERSITY DR.<br>RINGS, FL 3                          | 33071      | US                    |         |  |                            |  |  |
| Current Mailing Address:   |  |            |                       |         | New Mailing Address:   |                            |  |  |
| STE 402  | ERSITY DR.<br>RINGS, FL 3                          | 33071      | US                    |         |  |                            |  |  |
| FEI Number:  | 65-0508507   | FEI N      | umber Applied For()   | FEI Nun | nber Not Appli   | cable ( )                  | Certificate of Status Desired ( )  |  |
| Name and Address of Current Registered Agent:  |  |            |                       |         | Name and Address of New Registered Agent:                                    |                            |  |  |
| HUME, JOHN<br>1401 UNIVERSITY DR.<br>SUITE 301<br>CORAL SPRINGS, FL 33071 US   |  |            |                       |         | HUME, JOHN<br>1401 UNIVERSITY DR.<br>SUITE 402<br>CORAL SPRINGS, FL 33071 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:   |  |            |                       |         | 01/26/2006   |                            |  |  |
| Electronic Signature of Registered Agent   |  |            |                       |         | Date   |                            |  |  |
| Election Cam   | paign Financir                                     | ng Trust F | und Contribution ( ). |         |  |                            |  |  |
| OFFICERS AND DIRECTORS:  |  |            |                       |         | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:                                 |                            |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | DPT (<br>HUME, JOHN<br>1401 UNIVERS<br>CORAL SPRIN |            | <del>*</del> 301      |         | Title:<br>Name:<br>Address:<br>City-St-Zip:                                  | HUME, JOHN<br>1401 UNIVER  | X) Change ()Addition<br>SITY DR., SUITE 402<br>NGS, FL 33071 US            |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | VS (<br>JOHNSON, HE<br>1401 UNIVERS<br>CORAL SPRIN | SITY DR.,  | SUITE 301             |         | Title:<br>Name:<br>Address:<br>City-St-Zip:                                  | SCHULTZ, SA<br>1401 UNIVER | X) Change ()Addition<br>NLLY J<br>SITY DR., SUITE 402<br>NGS, FL 33071 US  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | D (<br>EZRATTI, MAY<br>1401 UNIVERS<br>CORAL SPRIN | SITY DR #  |                       |         | Title:<br>Name:<br>Address:<br>City-St-Zip:                                  | EZRATTI, MA                | RASS PKWY., SUITE 300  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | D (<br>EZRATTI, ROS<br>1401 UNIVERS<br>CORAL SPRIN | SITY DR #  |                       |         | Title:<br>Name:<br>Address:<br>City-St-Zip:                                  | EZRATTI, RO                | RASS PKWY., SUITE 300  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | (  | ) Delete   |                       |         | Title:<br>Name:<br>Address:<br>City-St-Zip:                                  | HUME, BARB<br>1401 UNIVER  | ) Change (X) Addition<br>ARA J<br>.SITY DR., SUITE 402<br>NGS, FL 33071 US |  |

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN HUME DP 01/26/2006