FILED
May 04, 2004 8:00 am
Secretary of State
05-04-2004 90193 025 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000069550

1. Entity Name
HARBOR TITLE & ESCROW COMPANY

24068176

Principal Place of Business	Mailing Address
~~3755 7TH TERR~~ ~~STE 301~~ ~~VERO BEACH, FL 32960 US~~	~~3755 7TH TERR~~ ~~STE 301~~ ~~VERO BEACH, FL 32960 US~~

04012004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
22773 S. PONDEROSA DRIVE	22773 S. PONDEROSA DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BOCA RATON, FLA	City & State: BOCA RATON, FLA
Zip: 33428 Country: USA	Zip: 33428 Country: USA

4. FEI Number: 65-0520998 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~LANDERS, DENIELLE M~~ ~~3755 7TH TERRACE~~ ~~SUITE 301~~ ~~VERO BEACH, FL 32960~~	Name: PETER J. HENN Street Address (P.O. Box Number is Not Acceptable): 22773 S. PONDEROSA DRIVE City: BOCA RATON FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: P [signature] PETER J. HENN 4/26/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P/D~~ ~~LANDERS, DENIELLE M~~ ~~3755 7TH TERR STE 301~~ ~~VERO BEACH, FL 32960~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D PETER J. HENN 22773 S. PONDEROSA DRIVE BOCA RATON, FL 33428
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: P [signature] 4/26/04 561-451-8370
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: PETER J. HENN, P/D
Date Daytime Phone #