# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # P94000070697

1. Entity Name

TAMPA TITLE COMPANY



Principal Place of Business

3321 HENDERSON BLVD TAMPA, FL 33609 Mailing Address

3321 HENDERSON BLVD TAMPA, FL 33609

## FILED Mar 31, 2008 8:00 am Secretary of State

03-31-2008 90036 040 \*\*\*150.00

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01112008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 59-3271731 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GIBBONS, GARY A 3321 HENDERSON BLVD TAMPA, FL 33609

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	ions of registered agent.	orpose or crianging its regis	dered office of registered agent, or bo	nn, in the State of Florida. Tam familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title i	applicable. (NOTE: Regis	stared Agent signature required when reinstating)	DAYE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.		~ <del>_</del> +++++, 20			
10. ·	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GIBBONS, GARY A. 3321 HENDERSON BLVD TAMPA, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NEUMAN, ROD B. 3321 HENDERSON BLVD TAMPA, FL		, , , , , , , , , , , , , , , , , , ,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIBBONS, KIRK 3 3321 HENDERSON BLVD TAMPA, FL 33609		DO	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN		
TITLE NAME STREET ADDRESS	D INCLAN, CARMEN 7650 COURTNEY CAMPBELL CAUSE	EWAY	* p *		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attactpress with an actuacy with an actuacy with an actuacy of the empowered.

SIGNATURE:

TAMPA, FL 33607

CITY-\$1-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

My O HOOMS PRINTED NAME OF BIONING OFFICER OR DIRECTOR

3/18/08

813877-9222 Oayture Phone #