

P950000 32899

(Requestor's Name)

(Address)

(Address)

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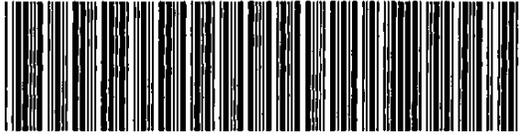
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Coast Title Insurance Agency, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P95000032899

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey P. Brock, Esq.  
(Name of Person)

Smith Hood Perkins Loucks Stout Bigman Lane & Brock, P.A.  
(Name of Firm/Company)

444 Seabreeze Blvd., Suite 900  
(Address)

Daytona Beach, FL 32118  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey P. Brock at ( 386 ) 254-6875  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER AND DIRECTOR RESIGNATION FOR A CORPORATION**

I, **DONALD T. O'BRIEN, JR.**, hereby resign as Vice President, Secretary and Director of **COAST TITLE INSURANCE AGENCY, INC.**, Document Number **P95000032899**, a corporation organized under the laws of the State of Florida.

  
DONALD T. O'BRIEN, JR.

9/24/07

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