


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # P96000102063


1. Entity Name
 TITAN 474, INC.



Principal Place of Business
 2281 LEE ROAD, SUITE 204
 WINTER PARK, FL 32789

Mailing Address
 2281 LEE ROAD, SUITE 204
 SUITE 103
 WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE



02032005 No Chg-P CR2E034 (10/03)

4. FEI Number
 59-3420781

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIETKIEWICZ, STANLEY T
 2281 LEE ROAD
 SUITE 103
 WINTER PARK, FL 32789

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

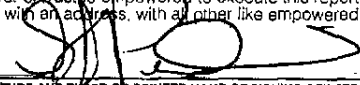
10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PIETKIEWICZ, STANLEY T
STREET ADDRESS	2281 LEE ROAD, SUITE 204
CITY - ST - ZIP	WINTER PARK, FL
TITLE	VPS
NAME	AVERY, DELBERT W
STREET ADDRESS	2281 LEE ROAD, SUITE 204
CITY - ST - ZIP	WINTER PARK, FL
TITLE	VPT
NAME	SECRET, ROBERT L III
STREET ADDRESS	2281 LEE ROAD, SUITE 204
CITY - ST - ZIP	WINTER PARK, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  DATE: 3-8-05 DAYTIME PHONE #: 407-645-1965

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR