

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000010012

FILED
Sep 13, 2004
Secretary of State

Entity Name: TITLECORP OF FLORIDA, INC.

Current Principal Place of Business:

398 FREEMAN STREET
LONGWOOD, FL 32750

New Principal Place of Business:

355 S. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

Current Mailing Address:

398 FREEMAN STREET
LONGWOOD, FL 32750

New Mailing Address:

355 S. RONALD REAGAN BLVD.
LONGWOOD, FL 32750

FEI Number: 59-3422988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCHIE, ROBERT W
398 FREEMAN STREET
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

ARCHIE, ROBERT W
355 S. RONALD REAGAN BLVD.
LONGWOOD, FL 32750 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: ROBERT W. ARCHIE

09/13/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARCHIE, ROBERT W
Address: 670 N. ORLANDO AVE., STE 102
City-St-Zip: MAITLAND, FL 32751

Title: S () Delete
Name: ARCHIE, REBECCA
Address: 670 N. ORLANDO AVE., STE 102
City-St-Zip: MAITLAND, FL 32751

Title: V () Delete
Name: JOHNSON, WILLIAM H
Address: 670 N. ORLANDO AVE., STE 102
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ARCHIE, ROBERT W
Address: 355 S. RONALD REAGAN BLVD.
City-St-Zip: LONGWOOD, FL 32750

Title: SECR (X) Change () Addition
Name: ARCHIE, REBECCA
Address: 355 S. RONALD REAGAN BLVD.
City-St-Zip: LONGWOOD, FL 32750

Title: VICE (X) Change () Addition
Name: JOHNSON, WILLIAM H
Address: 355 S. RONALD REAGAN BLVD.
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM H. JOHNSON

VICE

09/13/2004

Electronic Signature of Signing Officer or Director

Date