

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076619

Entity Name: GULF TITLE COMPANY

FILED  
Mar 26, 2009  
Secretary of State

## Current Principal Place of Business:

2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 US

## New Principal Place of Business:

2717 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 US

## Current Mailing Address:

2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 US

## New Mailing Address:

2717 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 US

FEI Number: 59-3506127

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BORDELON, JOHN S  
2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32561 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DST ( ) Delete  
Name: BORDELON, JOHN S  
Address: 2721 GULF BREEZE PARKWAY  
City-St-Zip: GULF BREEZE, FL 32563

Title: DP ( ) Delete  
Name: SCHULTZ, KERRY ANNE  
Address: 2721 GULF BREEZE PARKWAY  
City-St-Zip: GULF BREEZE, FL 32563

Title: DVP ( ) Delete  
Name: BORDELON, MATTHEW D  
Address: 2721 GULF BREEZE PKWY  
City-St-Zip: GULF BREEZE, FL 32563

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVPS (X) Change ( ) Addition  
Name: BORDELON, JOHN S  
Address: 2721 GULF BREEZE PARKWAY  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: DP (X) Change ( ) Addition  
Name: LYNCHARD, R LANE  
Address: 1901 ANDORRA STREET  
City-St-Zip: NAVARRE, FL 32566 US

Title: DT (X) Change ( ) Addition  
Name: THIEMAN GREENE, SHARI D  
Address: 2721 GULF BREEZE PKWY  
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOHN S. BORDELON

DVPS

03/26/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date