2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010018

Entity Name: TITLEAMERICA, INCORPORATED

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business: 1715 N WESTSHORE BLVD STE 990 TAMPA, FL 33607			New Prince	New Principal Place of Business: 7360 BRYAN DAIRY ROAD SUITE 200 LARGO, FL 33777		
			SUITE 200			
Current M	lailing Addre	ss:	New Mail	New Mailing Address:		
7360 BRYAN DAINY ROAD SUITE 200 LARGO, FL 33777			SUITE 200	7360 BRYAN DAIRY ROAD SUITE 200 LARGO, FL 33777		
FEI Number:	: 59-3503594	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	RYAN TRE POINTE SSEE, FL 323					
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Can	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	CONWAY, MIC	POINTE BLVD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	FRANK, CAN	() Change (X) Addition MPERLENGO N DAIRY ROAD, SUITE 200 33777	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	V JIM, GALLA\ 7360 BRYA\ LARGO, FL	N DAIRY ROAD, SUITE 200	
Title: Name: Address:	() Delete	Title: Name: Address:	V MICHAEL, L	()Change(X)Addition AROSA N DAIRY ROAD, SUITE 200	

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: MICHAEL LAROSA V 04/26/2005