

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # P98000018212

1. Entity Name
REALTY TITLE SERVICES OF NORTHEAST FLORIDA,
INC.



Principal Place of Business
2500 BLANDING BLVD
SUITE 100
MIDDLEBURG, FL 32068

Mailing Address
2500 BLANDING BLVD.
SUITE 100
MIDDLEBURG, FL 32068



04172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3495088	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, DOUGLAS W
2500 BLANDING BLVD., STE. 100
MIDDLEBURG, FL 32068

DO NOT WRITE
IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000909782
05/06/08-80083-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JOHNSON, DOUGLAS W
STREET ADDRESS	4561 TARRAGON AVE
CITY-ST-ZIP	MIDDLEBURG, FL 32068

TITLE	D
NAME	JOHNSON, JOYCE L
STREET ADDRESS	4561 TARRAGON AVE
CITY-ST-ZIP	MIDDLEBURG, FL 32068

TITLE	VD
NAME	LARSON, DONNA
STREET ADDRESS	72 LION ST
CITY-ST-ZIP	MIDDLEBURG, FL 32068

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

DOUGLAS W. JOHNSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-08
Date

904-237-0634
Daytime Phone #