

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000018259

Entity Name: ALLEGIANCE TITLE AGENCY, INC.

FILED  
Apr 26, 2007  
Secretary of State

## Current Principal Place of Business:

220 E CENTRAL PARKWAY  
SUITE 2040  
ALTAMONTE SPRINGS, FL 32701

## New Principal Place of Business:

## Current Mailing Address:

220 E CENTRAL PKWY  
SUITE 2040  
ALTAMONTE SPRINGS, FL 32701

## New Mailing Address:

FEI Number: 59-3495609

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAMPSON, PEGGY A P  
584 ALBANY PLACE  
LONGWOOD, FL 32779 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: P ( ) Delete  
Name: SAMPSON, PEGGY A P  
Address: 584 ALBANY PLACE  
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete  
Name: DEAL, LARRY P  
Address: 1941 LK MARKHAM PRESERVE  
City-St-Zip: SANFORD, FL 32771

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DEAL, LARRY P D  
Address: 1941 LK MARKHAM PRESERVE  
City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Change (X) Addition  
Name: CIRIACO, EDWARD A VP  
Address: 4908 ROCK ROSE LOOP  
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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: PEGGY A. SAMPSON

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date