## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000059489

FILED Feb 01, 2007 Secretary of State

Entity Name: SOUTH FLORIDA TITLE INSURERS OF BROWARD COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

350 EAST LAS OLAS BLVD. 1318 S.E. 2ND AVENUE STE. 980 FT. LAUDERDALE, FL 33316

FT. LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

350 EAST LAS OLAS BLVD. 1318 S.E. 2ND AVENUE STE. 980 FT. LAUDERDALE, FL 33316

FT. LAUDERDALE, FL 33301

FEI Number: 65-0859112 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TAYLOR, GREGORY B
350 EAST LAS OLAS BLVD.
9TH FLOOR
TAYLOR, GREGORY B
1318 S.E. 2ND AVENUE
FT. LAUDERDALE, FL 33316 US

FT. LAUDERDALE, FL 33301 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: 02/01/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name:TAYLOR, GREGORY BName:TAYLOR, GREGORY BAddress:350 E. LAS OLAS BLVD., 9TH FLOORAddress:1318 S.E 2ND AVENUECity-St-Zip:FORT LAUDERDALE, FL 33301City-St-Zip:FORT LAUDERDALE, FL 33316

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 THOMPSON, MARK
 Name:
 THOMPSON, MARK

 Address:
 350 EAST LAS OLAS BLVD.
 Address:
 1318 S.E. 2ND AVENUE

 City-St-Zip:
 FT. LAUDERDALE, FL 33301
 City-St-Zip:
 FT. LAUDERDALE, FL 33316

Title: S () Delete Title: S (X) Change () Addition

Name:MOORE, KEITHName:MOORE, KEITHAddress:350 EAST LAS OLAS BLVD.Address:1318S.E. 2ND AVENUECity-St-Zip:FT. LAUDERDALE, FL 33301City-St-Zip:FT. LAUDERDALE, FL 33316

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: GREGORY B. TAYLOR D 02/01/2007