

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000088781

FILED
Aug 04, 2009
Secretary of State**Entity Name:** CONSUMER LAND TITLE INSURANCE AGENCY. INC.**Current Principal Place of Business:**300 SEVILLA AVE.
SUITE 205
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**300 SEVILLA AVE., SUITE 205
CORAL GABLES, FL 33134**New Mailing Address:****FEI Number:** 65-0955916**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FREIJO, VICKY
300 SEVILLA AVE., SUITE 205
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: FREIJO, VICKY
Address: 2610 SW 5TH AVENUE
City-St-Zip: MIAMI, FL 33129**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: VICKY FREIJO

PRES

08/04/2009

Electronic Signature of Signing Officer or Director

Date