2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# P99000065016

Entity Name: TWIN LAND TITLE, INCORPORATED

Current Principal Place of Business:

57 N. LAKEVIEW AVE
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

160 S. MAIN ST.
STE. 100
WINTER GARDEN, FL 34787 US

Current Mailing Address:

57 N. LAKEVIEW AVE.
WINTER GARDEN, FL 34787

New Mailing Address:

160 S. MAIN ST.
STE 100
WINTER GARDEN, FL 34787

FEI Number: 59-3591128 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CROWE, TIMOTHY SR
105 W. PLANT ST., STE. 11
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

CROWE, TIMOTHY SR
160 S. MAIN ST.
STE. 100
WINTER GARDEN, FL 34787 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: 05/08/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CROWE, TIMOTHY
Address: 57 N. LAKEVIEW AVE.
City-St-Zip: WINTER GARDEN, FL 34787

Title: V ( ) Delete
Name: CROWE, SHEILA
Address: 57 N. LAKEVIEW AVE.
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SHEILA CROWE VP 05/08/2009
Electronic Signature of Signing Officer or Director Date