

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S62382

FILED  
Jan 20, 2011  
Secretary of State

Entity Name: SAWGRASS TITLE & ESCROW, INC.

**Current Principal Place of Business:**

8551 W. SUNRISE BLVD.  
SUITE 208  
FORT LAUDERDALE, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

8551 W. SUNRISE BLVD.  
SUITE 208  
FORT LAUDERDALE, FL 33322

**New Mailing Address:**

FEI Number: 65-0274642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLOOMGARDEN, PAUL M  
8551 WEST SUNRISE BLVD.  
SUITE 208  
FORT LAUDERDALE, FL 33322 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: DPS  
Name: BLOOMGARDEN, PAUL M  
Address: 8551 W SUNRISE BLVD # 208  
City-St-Zip: FORT LAUDERDALE, FL 33322

Title: DVPT  
Name: ROSEN, PHILIP C  
Address: 8551 W. SUNRISE BLVD., #208  
City-St-Zip: FORT LAUDERDALE, FL 33322 US

I hereby 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 all other like empowered.

SIGNATURE: PAUL M. BLOOMGARDEN

P

01/20/2011

Electronic Signature of Signing Officer or Director

Date