

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90032 038 ***150.00

40015613



DOCUMENT # V06169 1. Entity Name GLOBAL TITLE COMPANY, A FLORIDA CORPORATION					
Principal Place of Business 13500 N. TAMiami TRAIL SUITE 9 NAPLES, FL 34110 US			Mailing Address 13500 N. TAMiami TRAIL SUITE 9 NAPLES, FL 34110 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0352527	
5. Certificate of Status Desired				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
LAWHON, ANTHONY M PARISH, WHITE, LAWHON, MOORE, PA 2171 PINE RIDGE RD, STE D NAPLES, FL 34109				Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				FL Zip Code	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GALY, ALBERT J. 13500 N. TAMiami TRAIL SUITE #9 NAPLES, FL 34109	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director And Chairman Of The Board
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DARGAI, LANA KAYE 13500 N. TAMiami TRAIL SUITE #9 NAPLES, FL 34110	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes; I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Lana Kaye Dargai</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			2/1/05 339-596-1330 <small>Date Daytime Phone #</small>		

ATTACHMENT



Division of Corporations

40015613

2005 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	V06169
Business Entity Name	GLOBAL TITLE COMPANY, A FLORIDA CORPORATION
Original File Date	01/13/1992

FEI Number 65-0352527

Principal Address 13500 N. TAMIAMI TRAIL
SUITE 9
NAPLES, FL 34110 US

Mailing Address 13500 N. TAMIAMI TRAIL
SUITE 9
NAPLES, FL 34110 US

Registered Agent ANTHONY M LAWHON
PARISH, WHITE, LAWHON, MOORE, PA
2171 PINE RIDGE RD, STE D
NAPLES, FL 34109 US

Officer/Director Name And Address

ND COB
GALY, ALBERT J.
13500 N. TAMIAMI TRAIL SUITE #9
NAPLES, FL 34109

P
DARGAI, LANA KAYE
13500 N. TAMIAMI TRAIL SUITE #9
NAPLES, FL 34110

If all of the above information is correct and you do not wish to make any changes, please select:

If you need to make changes to the above information, please select: