## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V22157

Entity Name: BETA TITLE COMPANY

FORT MYERS, FL 33912

City-St-Zip:

FILED Jul 06, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:		
SUITE 13	NWOOD LN. S, FL 33907				
	, Iailing Addre	ss:	New Maili	ng Address	:
SUITE 13	NWOOD LN S, FL 33907				
FEI Number	: 59-3112188	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:
12734 KEI SUITE 13	B. DAWSON NWOOD LN S, FL 33907 (	JS			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	I office or registered agent, or both,
SIGNATU	RE:				
Electronic Signature of Registered Ag			ent Date		
Election Ca	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD ( DAWSON, WII 19358 DEVON FT MYERS, FI	WOOD CIR	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VST ( DAWSON, DA' 6L'S FARM RO ESTERO, FL	DAD	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( DAWSON, CA 14931 PARKL FORT MYERS	AKE DR	Title: Name: Address: City-St-Zip:	DAWSON, T 19358 DEVO	(X) Change ( ) Addition ERESA G NWOOD CIR S, FL 33912
Title: Name: Address:	D () DAWSON, TEI 19358 DEVON		Title: Name: Address:		( ) Change ( ) Addition

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.

City-St-Zip:

SIGNATURE: WILLIAM B DAWSON PD 07/06/2006