

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V33257

FILED  
Jan 21, 2010  
Secretary of State

**Entity Name:** CONSUMER TITLE & ESCROW SERVICES CO., INC.

**Current Principal Place of Business:**

18830 U.S. HIGHWAY 19 NORTH  
313  
CLEARWATER, FL 33764 US

**New Principal Place of Business:**

**Current Mailing Address:**

18830 U.S. HIGHWAY 19 NORTH  
313  
CLEARWATER, FL 33764 US

**New Mailing Address:**

**FEI Number:** 59-3120818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZAHM, DOUGLAS C.  
18820 U.S. HWY 19 NORTH  
STE 212  
CLEARWATER, FL 33764 US

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

ZAHM, DOUGLAS C P  
18820 U.S. HWY 19 NORTH  
STE 212  
CLEARWATER, FL 33764 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: DOUGLAS C. ZAHM

01/21/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: MR.  
Name: ZAHM, DOUGLAS C P  
Address: 18830 U.S. HWY. 19 NORTH, STE. 300  
City-St-Zip: CLEARWATER, FL 33618

Title: MS.  
Name: SNYDER, LYNNDEE VP  
Address: 18830 US 19 NORTH STE 313  
City-St-Zip: CLEARWATER, FL 33764

Title: MR.  
Name: BALES, DOUGLAS M VP  
Address: 18830 US 19 NORTH STE 313  
City-St-Zip: CLEARWATER, FL 33764

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: DOUGLAS C. ZAHM

P

01/21/2010

Electronic Signature of Signing Officer or Director

Date