

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000038594

**Entity Name:** TITLE SECURITY AND ESCROW OF CENTRAL FLORIDA, INC.

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC4848073008**

**Current Principal Place of Business:**

1640 HIGHWAY A1A  
SUITE E  
SATELLITE BEACH, FL 32937

**Current Mailing Address:**

1425 MODOC CIRCLE  
MELBOURNE, FL 32934 US

**FEI Number: 59-3711974**

**Certificate of Status Desired: No**

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

MARTIN, LINDA J  
1425 MODOC CIRCLE  
MELBOURNE, FL 32934 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name MARTIN, LINDA J  
Address 1425 MODOC CIRCLE  
City-State-Zip: MELBOURNE FL 32934

Title PRES  
Name MARTIN, LINDA JPRES.  
Address 1425 MODOC CIRCLE  
City-State-Zip: MELBOURNE, FL 32934

Title S  
Name MARTIN, JONATHAN D  
Address 1425 MODOC CIRCLE  
City-State-Zip: MELBOURNE FL 32934

*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: LINDA J. MARTIN**

**PRESIDENT**

**01/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date