

**2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P13000084546

**Entity Name:** NEWCASTLE TITLE SERVICES, INC.**Current Principal Place of Business:**941 WEST MORSE BLVD.  
SUITE 100  
WINTER PARK, FL 32789**Current Mailing Address:**941 WEST MORSE BLVD.  
SUITE 100  
WINTER PARK, FL 32789 US**FEI Number:** 46-3888547**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALLACE, DANIEL A JR.  
941 WEST MORSE BLVD.  
SUITE 100  
WINTER PARK, FL 32789 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	P
Name	WALLACE, DANIEL A JR.
Address	941 WEST MORSE BLVD. SUITE 100
City-State-Zip:	WINTER PARK FL 32789

Title	VP
Name	HALL, CONNIE
Address	941 WEST MORSE BLVD. SUITE 100
City-State-Zip:	WINTER PARK FL 32789

Title	SEC
Name	HALL, CONNIE K.
Address	941 WEST MORSE BLVD. SUITE 100
City-State-Zip:	WINTER PARK FL 32789

Title	DIR
Name	WALLACE, DANIEL A JR.
Address	941 WEST MORSE BLVD. SUITE 100
City-State-Zip:	WINTER PARK FL 32789

Title	TREASURER
Name	RICHARDS, KELLIE
Address	941 WEST MORSE BLVD. SUITE 100
City-State-Zip:	WINTER PARK FL 32789

*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:** CONNIE K. HALL

V.P., SEC

06/02/2014

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