2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

BOCA RATON FL 33431

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

STE 400

US

F63858 DOCUMENT

1. Entity Name

STE 400

US

Principal Place of Business

4950 COMMUNICATION AVE.

2. Principal Place of Business

BOCA RATON FL 33431

Suite, Apt. #, etc.

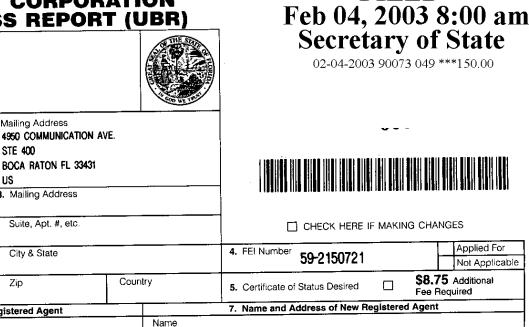
1201 HAYS STREET

City & State

Zip

SIGNATURE

RESORT TITLE AGENCY, INC.



Street Address (P.O. Box Number is Not Acceptable)

FILED

		1 65 State of Florida	Lam familiar with, and accent
В.	. The above named entity submits this statement for the purpose of changing its registered	d office or registered agent, or both, in the state of Florida.	Tam farmar with, and accept
	the obligations of registered agent.		

City

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

Country

CORPORATION SERVICE COMPANY

TALLAHASSEE FL 32301-2525

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Applied For

Not Applicable

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. OFFICERS AND DIRECTORS DP TITLE □ Delete TITLE NAME BASYE, LEON NAME STREET ADDRESS 4950 COMMUNICATION AVE., STE 400 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33431** CITY-ST-ZIP DVP Change X Addition TITLE Delete TITLE ALLAN J. HERZ. NAME FERGUSON, DANNY L NAME 4950 COMMUNICATION AVENUE, STE.400 4950 COMMUNICATION AVE., STE 400 STREET ADDRESS STREET ADDRESS BOCA RATON, FL 33431 CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33431 ☐ Change Addition ☐ Delete TITLE TITLE SD NAME TOMPKINS, RANDI S NAME STREET ADDRESS 4960 CONFERENCE WAY SUITE 100 STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33431 CITY-ST-ZIP Change... Addition TITLE Delete. Anthony Puleo NAME NAME 4960 Conference Way N., Ste100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Boca Raton, Fl 33431 CITY-ST-7IP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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. 561-912-8000

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Leon Basye

Date Daytime Phone # CR2E034 (10/02)