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**PROFIT** CCRPORATION ANNUAL REPORT



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secreta v of State

## **FILED** May 17, 1999 8:00 am Secretary of State

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	1999	DIVISION OF	CORPOR	ATIONS		~	13333		130.00	
i. Corporator			1310							
TOWN 8	COUNTRY TITLE GUARAN	TY OF HOLLYWOOD,	INC.							.:
Original Olympia	of Business	Mailing Address		<del></del>		f iktifik edin kolan kest man		r 4484) átabis ninib	RIEN BIRD (120)	
Principal Place		6565 TAFT STREET, SUITE	101		1					1 ;
HOLLYWOOD F	reet, suite 101 1 39024	HOLLYWOOD FL 33024	,01				<b>_</b>			;
INDECTMOOD !	L GOODEY					DO NOT W	<u> </u>	S SPACE		,   ;
						e Incorporated or Qualife	eo			;
		Ta Maria				/13/1984 Number		Ar	p ied For	
<b>-</b>	tace of Business	2a. Mailing Address				-2377561			ot Applicable	
Sulte, Apt.	# atc	Suite, Apt. #, etc.						\$8.75	Ar ditional	
22	m, 610.	27			5. Cer	tifcate of Status Desired		Fee Re	equired	1
City & S'at	B	City & State			6. Ela	ction Compaign Financir	s		- Alay Be	<b> </b>
23		28				st Fund Contribution			to Fees	
Zip	Country	Zip	Cour	ntry	- 1	s corporation owes the c	urrent year	Intangible	<b>iB</b> No	
24	25	29	30			sonal Property Tax. me and Address of New	v Registere		149110	
	9. Name and Add ress of Curren	t Registered Agent		B1 Name	10, 140	THE BITCH POOR STATE OF THE STA			<del></del>	
MILL	.S, RALPH B., III					No.				
	N.W. 47TH DRIVE			82 Street A	dress (P.O. I	Box Number is Not Acce	branet			
COF	AL SPRINGS FL 33067			B3						1 1
				04 63				. 85 Zip	Cxde	1 1
				84 City			F			1
11. Pursuant office crir agent. Fa	to the provisions of St ctions 607.050 egistered agent, or bo h, in the State im familiar with, and at cept the obliga	2 and 607,1508, Florida Statul of Florida, Such change was a tions of, Section 807,0505, Florida	tes, the at authorized anda Statu	ove-named or by the corporates.	rporation sul ution's board	omis this statement for t of directors. I hereby ac	ne purpose cept the app	ointment as re	g stered	
SIGNATURE				Agent signature req			DATE			
12.	Signature, typed or printed name of registered age	(NOTS) DIRECTORS	13.	Agent agricule req		ITIONS/CHANGES TO		NO DIRECTO	FIS IN 12	(11/98)
TITLE	PSD	DELETE	_		MUU	HICHSICHMAGES IC		☐ Change	- A 1 1111	
NAME	1	O DELETE	1,1 117	LE	AUU	THOMS:CHANGES TO			Addition	=   · · ·
STREET ADDRESS	MILLS, RALPH B. III	- Deterie	1,1 TIT 1,2 NA		AUU	THOMS:CHANGES TO			[_] Addition	8
	ALAC MIN ATTHE DOWN	. Deter	1.2 NA		AOO	THOMS: CHANGES TO			Addition	2E034 (1
C/TY-ST-ZIP	ALAC MIN ATTHE DOWN		1.2 NA 1.3 STI 1.4 C/T	ME REET AODRESS TY-ST-ZIP		TIONS CHARGES TO		- Channe		CR2E034 (1
C/TY-ST-ZIP TITLE	8165 N.W. 47TH ORIVE CORAL SPRINGS FL 33067 VTD	DELETE	1.2 NA 1.3 STI 1.4 CIT 2.1 TIT	ME REET AODRESS IY-ST-ZIP	AOO	TRINSICANIOCS TO		☐ Change	Addition	CR2E034 (1
	8165 N.W. 47TH ORIVE CORAL SPRINGS FL 33067 VTD MILLS, DANEEN S.		1.2 NA 1.3 STI 1.4 CIT 2.1 TITI 2.2 NA	ME REET AODRESS TY-ST-ZIP LE ME	A00	TRINSICANOCS TO		☐ Change		CR2E034 (1
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14. I hereby certify that the information supplied with this filling does not qualify 15 the exemption stated in Section 119.0 (3)(i), Florida Statutes. I further pertify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signarure 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 12 or Block 13 if change-1, or on an attac ment with an address, with all other like empowered. 954-

SIGNATURE AND PRINTED NAME OF SIGNING OF BIRM TO OR DIRECTOR B. M:115 TIL