

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

05-17-1999 90012 021 \*\*\*150.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # G91122**

1. Corporation Name

**TOWN & COUNTRY TITLE GUARANTY OF HOLLYWOOD, INC.**

Principal Place of Business  
6565 TAFT STREET, SUITE 101  
HOLLYWOOD FL 33024

Mailing Address  
6565 TAFT STREET, SUITE 101  
HOLLYWOOD FL 33024

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**03/13/1984**

4. FEI Number

**59-2377561**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip Country

28

9. Name and Address of Current Registered Agent

**MILLS, RALPH B. III  
8165 N.W. 47TH DRIVE  
CORAL SPRINGS FL 33067**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOT: Registered Agent signature required when remitting)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PSD  
MILLS, RALPH B. III  
8165 N.W. 47TH DRIVE  
CORAL SPRINGS FL 33067**

TITLE ☐ DELETE

NAME **VTD  
MILLS, DANEEN S.  
8165 N.W. 47TH DRIVE  
CORAL SPRINGS FL 33067**

TITLE ☐ DELETE

NAME **V  
WEISS, JAMES K  
234 SW 159TH AVENUE  
SUNRISE FL 33326**

TITLE ☐ DELETE

NAME **V  
ENGLE, BARBARA  
2805 MORNING GLORY LANE  
DAVE FL 33328**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if change-1, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Ralph B. Mills III**

**4-9-99 963-4740**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)