

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 10, 2000 8:00 am
Secretary of State

03-10-2000 90031 007 ***150.00

DOCUMENT # G91122

1. Entity Name

TOWN & COUNTRY TITLE GUARANTY OF HOLLYWOOD, INC.

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

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 59-2377561 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name B. J. REEVES ESQ
Street Address (P.O. Box Number is Not Acceptable) # 102
6565 TAFT ST
City HOLLYWOOD FL Zip Code 33024

8. 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 B. J. REEVES 3-6-00
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD
NAME MILLS, RALPH B. III
STREET ADDRESS 8165 N.W. 47TH DRIVE
CITY-ST-ZIP CORAL SPRINGS FL 33067
Delete
TITLE VTD
NAME MILLS, DANEEN S.
STREET ADDRESS 8165 N.W. 47TH DRIVE
CITY-ST-ZIP CORAL SPRINGS FL 33067
Delete
TITLE V
NAME WEISS, JAMES K
STREET ADDRESS 234 SW 159TH AVENUE
CITY-ST-ZIP SUNRISE FL 33326
Delete
TITLE V
NAME ENGLE, BARBARA
STREET ADDRESS 2805 MORNING GLORY LANE
CITY-ST-ZIP DAVIE FL 33328
Delete
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

NOTE spelling correction
↓

BARBARA ENGEL
2805 MORNING GLORY LANE
DAVIE, FL 33328

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH B. MILLS III 954
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3-6-00 Date Daytime Phone # 963-4740

CR2E034 (9/99)

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DO NOT WRITE IN THIS SPACE