

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00.

FILED
May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H38114
1. Corporation Name
Jefferson National Title Insurance Company

Principal Place of Business: 1031 W. Morse Blvd. Suite 250 Winter Park, FL 32789
Mailing Address: 1031 W. Morse Blvd. Suite 250 Winter Park, FL 32789

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified
01-15-1985

2. Principal Place of Business
21 Suite, Apt # etc
22 City & State
23 Zip
24 Country
25

2a. Mailing Address
26 Suite, Apt # etc
27 City & State
28 Zip
29 Country
30

4. FEI Number
59-2542469
Applied For
Not Applicable

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

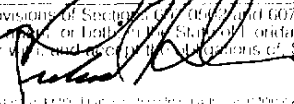
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
Denion Swann, Hadley & Alvarez, P.A.
1031 W. Morse Blvd.
Suite 270
Winter Park, FL 32789

10. Name and Address of New Registered Agent
81 Name **Swann, Hadley & Alvarez, P.A.**
82 Street Address (P.O. Box Number is Not Acceptable)
1031 W. Morse Blvd.
83 Suite 270
84 City **Winter Park** FL 85 Zip Code **32789**

Pursuant to the provisions of Section 607.005, 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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE:  DATE: **5-7-98**
President

12. OFFICERS AND DIRECTORS

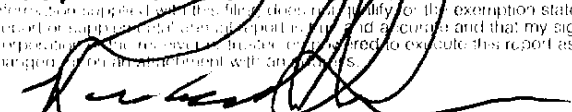
TITLE	PD	NAME	McAuliffe, Terence R.
STREET ADDRESS	11th Floor		816 Connecticut Av. N.W.
CITY-ST-ZIP			Washington, D.C. 20006
TITLE	VD	NAME	McAuliffe, Dorothy S.
STREET ADDRESS	11th Floor		816 Connecticut Av. N.W.
CITY-ST-ZIP			Washington D.C.
TITLE	D	NAME	O'Hanlon John
STREET ADDRESS			1401 K. Street N.W.; Suite
CITY-ST-ZIP			Washington, D.C. 20005
TITLE	D	NAME	Lydecker, Charles H.
STREET ADDRESS	P.O. Box 2412		220 S. Ridgewood Avenue
CITY-ST-ZIP			Daytona Beach, FL 32115-2412
TITLE	D	NAME	Kirschenbaum, Malcolm
STREET ADDRESS			402 High Point Drive
CITY-ST-ZIP			Cocoa, FL 32926
TITLE	D	NAME	Kelly, Darwin P., Jr.
STREET ADDRESS			5104 N. Orange Blossom Tr
CITY-ST-ZIP			Suite 103 Orlando, FL 32810

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	VPD	NAME	Swann, Richard R.
12 NAME			1031 W. Morse Blvd.; Suite 270
13 STREET ADDRESS			Winter Park, FL 32789
14 CITY-ST-ZIP			
21 TITLE			
22 NAME			
23 STREET ADDRESS			
24 CITY-ST-ZIP			
31 TITLE			
32 NAME			
33 STREET ADDRESS			
34 CITY-ST-ZIP			
41 TITLE			
42 NAME			
43 STREET ADDRESS			
44 CITY-ST-ZIP			
51 TITLE			
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE			
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

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-05/27/98--01088--034
***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supporting statement 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; and that I am a resident of the State of Florida. I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this change of information with an address.

SIGNATURE:  DATE: **4-20-98** 407-647-2777

CR2E034 (10/97)