FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # L73201 (0)

1. Corporation Name

TITLESOURCE, INC.

Principal Place of Business

C/O CYNTHIA B. BALDWIN
120 E. FORSYTH ST.
JACKSONVILLE FL 32202

Mailing Address

C/O CYNTHIA B. BALDWIN
120 E. FORSYTH ST.
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified: 05/14/1990

3a. Date of Last Report: 03/07/1995

4. FEI Number: 59-3009100 — 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business

21 219 Newnan St.
22 Suite 200
23 Jacksonville FL
24 Zip 32202 25 Country USA

2a. Mailing Address

26 219 Newnan St.
27 Suite 200
28 Jacksonville FL
29 Zip 32202 30 Country USA

9. Name and Address of Current Registered Agent

BALDWIN, CYNTHIA B.
120 E. FORSYTH ST.
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name: Baldwin, Cynthia B.
82 Street Address (P.O. Box Number is Not Acceptable): 219 Newnan St.
83 Suite 200
84 City: Jacksonville FL 85 Zip Code: 32202

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 — NOTE: Registered Agent's signature required if changes including — DATE

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		
PD BALDWIN, CYNTHIA B. 120 E. FORSYTH ST. JACKSONVILLE FL	☐ DELETE	
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☑ Change ☐ Addition	219 Newnan St., Suite 200 Jacksonville FL 32202
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE Cynthia B. Baldwin — Cynthia B. Baldwin 4-2-96 (904)7919688

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)