

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 10, 2002 8:00 am**  
**Secretary of State**

05-10-2002 90063 027 \*\*\*150.00

**DOCUMENT #**

1. Entity Name

TYS TITLE SERVICES, INC.

**DO NOT WRITE IN THIS SPACE**

80093724

2. Principal Place of Business

1221 LEE RD

3. Mailing Address

P.O. BOX 741255

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 103

DO NOT WRITE IN THIS SPACE

City & State

City & State

ORLANDO FL 32810

ORANGE CITY FL

Zip Country

Zip Country

32810 US

32774 US

4. FEI Number

59-3473639

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

CAPITAL CONNECTION, INC.

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

417 E. VIRGINIA ST., STE 1

City

TALLAHASSEE

FL

Zip Code

32301 1283

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

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)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	FRANKLIN, MARGUERITE G	1221 LEE RD., STE 103	ORLANDO FL 32810				
DVP	BULLOCK, MARY	1221 LEE RD., STE 103	ORLANDO FL 32810				
DVP	FERRELL, JANIS	1221 LEE RD., STE 103	ORLANDO FL 32810				
DTS	RIJOS, IVY	1221 LEE RD., STE 103	ORLANDO FL 32810				
AS	GOODALE, JONI	1221 LEE RD., STE 103	ORLANDO, FL 32810				

**DO NOT WRITE  
IN THIS SPACE**

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janis Ferrell, VP Janis Ferrell 4/29/02 407 292 9709

Date

Daytime Phone #