## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # H92627

1. Corporation Name

(9)

CHELSEA TITLE COMPANY

493 E SEMORAN BLVD. CASSELBERRY FL 32707

Principa: Place of Business

Mailing Address

493 E SEMORAN BLVD. CASSELBERRY FL 32707



96 FEB 29 AM 9: 49

SECRETARY OF STAT	Έ
Wildy Adjoint	

CASSELBERRY FL 32707		CASSELBERRY FL 32707							
						3. Date Incorporated or Qualified 01/02/1986	3a. Date		t Report /1995
2. Principa! Pla	ce of Business	2a. Mailing Address	·			4. FEI Number		Ţ.	Applied For
21		26			59-2872587			Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	X		75 Additional se Required
City & State						Election Campaign Financing     Trust Fund Contribution			.00 May Be
Zip	Country	Zip	Country			8. This corporation has liability for i	ntangible ta		
24	25	29	30			Florida Statutes X Yes			
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistered /	Agent	
			81	N	lame				
DANIFI	.s. George		82		*** 6 dd	ess (P.O. Box Number is Not Acceptab	la)		
	SEMORAN BLVD.		84		street Addre	ess (P.O. Box Number is not Acceptab	ie)		
	LBERRY FL 32707		83	1-					
ONOOL	EDETATI TE GETO!		]						
			84		City		FI	85	Zip Code
or registere familiar witi SIGNATURE	o the provisions of Sections 607,0502 dagent, or both, in the State of Floricin, and accept the obligations of, Sections, and accept the obligations of sections of the section of the	la. Such change was authoriz on 607.0505, Florida Statutes	ed by the cor	oora	tion's board	ation submits this statement for the pur d of directors. Thereby accept the appropriate appropriate appropriate appropriate and the purpose of the purpose appropriate appropr	pose of cha pintment as	inging registe	its registered office ered agent. I am
12.	OFFICERS AND		13.	,,,,	renewe response	ADDITIONS/CHANGES TO OFF		DIRE	CTORS IN 12
TITLE	VSD	☐ DELETE	1. 1 TITLE				· <del></del>	Char	
NAME	DANIELS, GEORGE	_	1.2 NAME						
STREET ADDRESS	493 E SEMORAN BLVD.		1.3 STRE		ORESS				
CITY-ST-ZIP	CASSELBERRY FL		1.4 CITY						
TITLE	PD	[ DELETE	2 1 1111		<del>"</del>	1 1"U"11	11111	I-Cija/	geliu 🔚 "Additibn
NAME	LASSITER, ROY		2.2 NAM			-03/047		<b>1 □ -° □ •</b> /9601003011	
STREET ADDRESS	493 E SEMORAN BLVD.			2.3 STREET ADDRESS		東京電影学	าชั้วรู้	**	×208.75
CITY-SI ZIP	CASSELBERRY FL		2 4 CITY			( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			
TITLE	V	DELETE	3 1 TITLI					Chai	ige Addition
NAME	ALLEN, BARBARA LEE MS	~	3.2 NAME						
STREET ADDRESS	493 E. SEMORAN BLVD.		33 STRE		DRESS				
Cilly -ST-ZiP	CASSELBERRY FL		3 4 CITY						
TI*LE	V	☐ DELETE	4 1 TITL					Cha	nge 🔲 Addition
NAME	MAZER, BARRY J.	_	4.2 NAM						
STREET ADDRESS	493 E. SEMORAN BLVD.		4.3 STRE	E AD	OPESS				
City-ST-ZIP	CASSELBERRY FL		4.4 CITY		1				
TITLE	VP	☐ DELETE	5 1 TITL				[	Cha	nge 🔲 Add-tion
NAME	JETT, RICHARD M.		5.2 NAM						
STREET ADDRESS	493 E. SEMORAN BLVD		53 \$1RE		DRESS				
C(TY-ST-ZIP	CASSELBERRY FL		5.4 CITY		(IP	ο / ω <sup>l</sup> ο			
TITLE	VT	DELETE	6 1 TITL		V/	T/D COLT		<b>X</b> Cha	nge Addition
NAME	RUMSEY, STEPHEN T.		6.2 NAM			(WL) MY			
STREET ADDRESS	493 E. SEMORAN BLVD.		63 STRE		DRESS	( ) ( ) ( ) ( )			
CHTV . CT . 710	CASSELBERRY FI		64017			$\bigcirc$			

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 indicates 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 truetee 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 attackment with an address.

SIGNATURE: ....

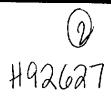
LOW Was dasseth Roy William Lassiter SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/96

407-260-8050

Daytime Phone #

HZE034 (12/95)



## CHELSEA TITLE COMPANY

TITLE	NAMES OF OFFICERS & DIRECTORS	STREET ADDRESS OF EACH OFFICER AND DIRECTOR	CITY, STATE, & ZIP
С	HAUGHTON, WALTER R.	601 MONTGOMERY STREET	SAN FRANCISCO, CA 94111
М	PORTER, LLOYD A.	601 MONTGOMERY STREET	SAN FRANCISCO, CA 94111
V	SUSSMAN, WILLIAM E.	493 E. SEMORAN BLVD.	CASSELBERRY, FL 32707
М	LORENZEN, JOHN M.	601 MONTGOMERY STREET	SAN FRANCISCO, CA 94111

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