


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

FILED
May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G30524** (4)
1. Corporation Name
METROPOLITAN TITLE & GUARANTY COMPANY



Principal Place of Business 2728 N HARWOOD ST DALLAS TX 75201 US	Mailing Address P.O. BOX 199000 DALLAS TX 75219 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 03/25/1983	
		4. FEI Number 59-2454422		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DC	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	HEARNE, CARL N.		12 NAME	David W. Quinn			
STREET ADDRESS	2728 N HARWOOD ST		13 STREET ADDRESS	2728 N. Harwood St.			
CITY-ST-ZIP	DALLAS TX		14 CITY-ST-ZIP	Dallas, TX 75201			
TITLE	VD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	AV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	SMERGE, RAYMOND G.		2.2 NAME	Janet L. Erickson			
STREET ADDRESS	2728 N HARWOOD ST		2.3 STREET ADDRESS	2728 N. Harwood St.			
CITY-ST-ZIP	DALLAS TX		2.4 CITY-ST-ZIP	Dallas, TX 75201			
TITLE	VT	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	VT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	CAROTHERS, RICK		3.2 NAME	Vicki A. Roberts			
STREET ADDRESS	2728 N HARWOOD ST		3.3 STREET ADDRESS	2728 N. Harwood St.			
CITY-ST-ZIP	DALLAS TX		3.4 CITY-ST-ZIP	Dallas, TX 75201			
TITLE	P	<input type="checkbox"/> DELETE	4.1 TITLE	D/P/CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BATES, KARREN P.		4.2 NAME				
STREET ADDRESS	2728 N HARWOOD ST		4.3 STREET ADDRESS				
CITY-ST-ZIP	DALLAS TX		4.4 CITY-ST-ZIP				
TITLE	SV	<input type="checkbox"/> DELETE	5.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SMERGE, RAYMOND G		5.2 NAME				
STREET ADDRESS	3333 LEE PKWY		5.3 STREET ADDRESS	2728 N. Harwood St.			
CITY-ST-ZIP	DALLAS TX		5.4 CITY-ST-ZIP	Dallas, TX 75201			
TITLE	AV	<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MASON, JEFF A		6.2 NAME				
STREET ADDRESS	2728 N HARWOOD ST		6.3 STREET ADDRESS				
CITY-ST-ZIP	DALLAS TX		6.4 CITY-ST-ZIP				

14. 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 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 _____ DATE _____

CR2E034 (10/97)