

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 582939

**Entity Name:** MASTER TITLE SERVICE, INC.

**Current Principal Place of Business:**

6337 RIVER RD  
NEW PORT RICHEY, FL 34652

**Current Mailing Address:**

6337 RIVER RD  
NEW PORT RICHEY, FL 34652

**FEI Number:** 59-1857734

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JULIAN, MARY E  
6337 RIVER RD  
NEW PT RICHEY, FL 34652 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name JULIAN, MARY E  
Address 5526 PALMETTO ROAD  
City-State-Zip: NEW PT RICHEY FL 34652

Title VP  
Name JULIAN, JAMES  
Address 6337 RIVER ROAD  
City-State-Zip: NEW PORT RICHEY FL 34652

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARY JULIAN

**PRESIDENT**

**01/26/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date