

2022 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 VP
Name JULIAN, MARY E
Address 6337 RIVER RD
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR
Name PASCHEN, TOM E.
Address 2424 NORTH FEDERAL HWY, SUITE 360
City-State-Zip: BOCA RATON FL 33431

Title SVP
Name JONES, NANCY
Address 2424 NORTH FEDERAL HWY, SUITE 360
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name SHAPIRO, GERALD M.
Address 2424 N FEDERAL HWY, SUITE 360
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name SHAPIRO, JASON
Address 2424 NORTH FEDERAL HWY, SUITE 360
City-State-Zip: BOCA RATON FL 33431

Title AS
Name REICHERT, JOSEPH M.
Address 878 EAST PALMETTO PARK RD
City-State-Zip: BOCA RATON FL 33432

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: JOSEPH M. REICHERT

AS

03/08/2022

Electronic Signature of Signing Officer/Director Detail

Date