

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

FILED
Jan 30 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 # **011196** (3)
1. Corporation Name
TITLE & TRUST COMPANY OF FLORIDA



Principal Place of Business 1901 W. COLONIAL DRIVE ORLANDO FL 32804	Mailing Address 1700 MARKET ST 22ND FL PHILADELPHIA PA 19103 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/22/1922	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-0482980		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		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 SMITH, JAMES W 1901 W COLONIAL DR ORLANDO FL 32804		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
		85 Zip Code FL	

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	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WENDER, HERBERT	1.2 NAME	
STREET ADDRESS	1700 MARKET ST 22ND FL	1.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	1.4 CITY-ST-ZIP	
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAUSER, ROBERT J J	2.2 NAME	P
STREET ADDRESS	1700 MARKET ST 22ND FL	2.3 STREET ADDRESS	Herbert Wender
CITY-ST-ZIP	PHILADELPHIA PA	2.4 CITY-ST-ZIP	1700 Market St.
TITLE	DSVP <input type="checkbox"/> DELETE	3.1 TITLE	Philadelphia, PA 19103 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAPP, JOHN P.	3.2 NAME	
STREET ADDRESS	1700 MARKET ST 22ND FL	3.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	3.4 CITY-ST-ZIP	
TITLE	SVPD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TISCHLER, JEFFREY	4.2 NAME	
STREET ADDRESS	1700 MARKET ST 22ND FL	4.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	4.4 CITY-ST-ZIP	
TITLE	VSD <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYNCH, JAMES J. D. JR.	5.2 NAME	V
STREET ADDRESS	1700 MARKET ST 22ND FL	5.3 STREET ADDRESS	Lynch, James J. D., Jr.
CITY-ST-ZIP	PHILADELPHIA PA	5.4 CITY-ST-ZIP	1700 Market St.
TITLE	VD <input type="checkbox"/> DELETE	6.1 TITLE	Philadelphia, PA. 19103 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GLASSBERG, DAVID E	6.2 NAME	
STREET ADDRESS	1700 MARKET ST 22ND FL	6.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	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.

CP2E034 (10/97)