

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 128000

1. Corporation Name  
NATIONAL TITLE COMPANY

Principal Place of Business

151 S W 27TH AVE  
P. O. BOX 350100  
MIAMI 35 FL 33135

Mailing Address

151 S W 27TH AVE  
P. O. BOX 350100  
MIAMI 35 FL 33135

FILED  
Mar 23, 1999 8:00 am  
Secretary of State

03-23-1999 90014 003 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/21/1933

4. FEI Number  
59-0373560

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

Yes ☒ No ☐

2. Principal Place of Business

21 151 SW 27TH AVE  
Suite, Apt. #, etc.

2a. Mailing Address

26 151 SW 27TH AVE  
Suite, Apt. #, etc.

City & State

23 Miami FL

City & State

28 Miami FL

Zip

24 33135

Country

25 USA

Zip

29 33135

Country

30 USA

9. Name and Address of Current Registered Agent

RANDOL, W L  
151 SW 27TH AVE  
MIAMI FL

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

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD  
NAME HOOVER, ELIZABETH  
STREET ADDRESS 151 S.W. 27TH AVENUE  
CITY-ST-ZIP MIAMI FL 37135

TITLE SD  
NAME MARCUS, ELIZABETH  
STREET ADDRESS 151 SW 27TH AVENUE  
CITY-ST-ZIP MIAMI FL

TITLE T  
NAME BAKER, TERRELL J  
STREET ADDRESS 151 SW 27 AVE  
CITY-ST-ZIP MIAMI FL

TITLE PD  
NAME RANDOL, WILLIAM L., JR.  
STREET ADDRESS 151 SW 27TH AVENUE  
CITY-ST-ZIP MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T  
1.2 NAME WILLIAMS, John L.  
1.3 STREET ADDRESS 151 SW 27TH AVE  
1.4 CITY-ST-ZIP MIAMI FL 33135

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)