FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 408891 (0) 1. Corporation Name SUNCOAST TITLE COMPANY OF FLORIDA, INC.									
Principal Place of Business 7241 49TH STREET NORTH PINELLAS PARK FL 34665		Mailing Address 7241 49TH STREET NORTH PINELLAS PARK FL 34665			T 1943H 913H 40H4 18H0 19H1 14	IDI EIDI BEBR DID	II 01011 0701	6 6 6 6 6 6 6 6 6 6 6 6 6 6	
						3. Date Incorporated or Qualified 09/18/1972		of Last Re 4/17/19	eport 95
2. Principal Pla	Principal Place of Business 2a. Mailing Address 26					4. FEI Number Applied F			Applied For Not Applicable
Suite, Apt. #	I, etc.	Suite, Ap	t. #, etc.			5. Certificate of Status Desired			Additional Required
City & Stale		City & St. 28	ate			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24]	Country 25	Ζφ 29	30	Country			s 🔲 No		199.032,
	9. Name and Address of Cu	irrent Registered Age	ent	81	Name	10. Name and Address of New	Registered A	gent	
KANER, MENI 5010 PARK BLVD. PINELLAS PARK FL 33565				82	Street Addr	eet Address (P.O. Box Number is Not Acceptable)			
				83					
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				84	City			85 Zı	code :
11. Pursuant to	a the provisions of Sections 607.0	0502 and 607.1508 EI	orida Statutes, th		named corpor	ation submits this statement for the pu	FL irose of cha	noina its r	egistered office
SIGNATURE _	ed agent, or both, in the State of I th, and accept the obligations of S Standon, typed or pailed name of registered				oration's boar	of of directors. I hereby accept the app	pointment as	registered	agent. I am
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	ICERS AND		RS IN 12
THILE	P KANNED MENI	ANNER,MENI		1 1 117 (F] Change	☐ Add-tion
NAME STREET ADDRESS	5010 PARK BLVD.			1.2 NAME 1.3 STREET	ADDRESS				ļ
CITY-S*-7IP	PINELLAS PARK FL			14 CHY-5	1				
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NAME	KANNER, MENI 5010 PARK BLVD.			2 2 NAME					
STREET ALCRESS UPLY: ST-ZIP	PINELLAS PARK FL			23 STREET 24 City - 9					
Tillef			DELFTE	3 1 TITLE				Change	Add tion
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	LADDRESS				
CHY-S1-ZIP				3.4 CITY - 5	T 715		<u>-</u>		
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C(TY-ST-2(F				5.4 CITY - S					
THEF			DELETE	6 1 TITLE				Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				63 STREET	ADDRESS				
CITY-ST-ZIP				64 CHY-S	it-ziP sinot qualify fo				

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 iddress

3/19/96 813-546-8935

CR2E034 (12/95)