

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

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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 509861 (1)

1. Corporation Name
COMMUNITY TITLE AGENCY INCORPORATED

Principal Place of Business
LEGAL DEPT 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

Mailing Address
LEGAL DEPT 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-5417



3. Date Incorporated or Qualified **08/09/1976** 3a. Date of Last Report **04/16/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		59-1710574		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		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LANGLEY, MARCIA H LEGAL DEPT. 9TH FLOOR 2601 S BAYSHORE DR MIAMI FL 33133				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83 City			
				84 Zip Code			
				JOEL K. GOLDMAN 2601 S. Bayshore Dr. 9TH FLOOR MIAMI FL 33133			

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: *Joel K. Goldman* DATE: *4/11/97*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	V/S/D
NAME	JEFFREY, THOMAS W.	1.2 NAME	GOLDMAN, JOEL K.
STREET ADDRESS	2601 S. BAYSHORE DRIVE	1.3 STREET ADDRESS	2601 S. BAYSHORE DR
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	MIAMI FL 33133
TITLE	VSD	2.1 TITLE	V/A S
NAME	LANGLEY, MARCIA H.	2.2 NAME	LANGLEY, MARCIA H.
STREET ADDRESS	2601 S. BAYSHORE DRIVE	2.3 STREET ADDRESS	2601 S. BAYSHORE DR
CITY - ST - ZIP	MIAMI FL 33133	2.4 CITY - ST - ZIP	MIAMI FL 33133
TITLE	VT	3.1 TITLE	V/D/C/A S
NAME	FISCHER, JOHN H.	3.2 NAME	CARLETON, CALLIS N
STREET ADDRESS	2601 S. BAYSHORE DRIVE	3.3 STREET ADDRESS	2601 S. BAYSHORE DR
CITY - ST - ZIP	MIAMI FL	3.4 CITY - ST - ZIP	MIAMI FL 33133
TITLE	VAS	4.1 TITLE	
NAME	GOLDMAN, JOEL K.	4.2 NAME	
STREET ADDRESS	2601 S. BAYSHORE DRIVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33133	4.4 CITY - ST - ZIP	
TITLE	VD	5.1 TITLE	
NAME	CARLETON, CALLIS N.	5.2 NAME	
STREET ADDRESS	2601 S BAYSHORE DR	5.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33133	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: *Joel K. Goldman* DATE: *4/11/97* 3.5-859.4871

CR2E034 (9/96)