Mailing Address



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

509861 DOCUMENT

1. Corporation Name

Principal Place of Business

COMMUNITY TITLE AGENCY INCORPORATED

| | LEGAL DEPT 9TH FLOOR 2601 S BAYSHORE DR MIAMI FL 33133-2461 | | | DO NOT WRITE IN TH 3. Date Incorporated or Qualifed | S SPAC | E | |
|--|---|---|--|---|---------------------|-----------------------|-------------------------------------|
| | A 14-11- A 44 | | | 08/09/1976 4. FEI Number | | 1 4 2 2 | lied For |
| | 2a. Mailing Address | | | 59-1710574 | - | | Applicable |
| 21 | | | | | \$8 | | dditional |
| ├ ─, ''' ' | 7 | | | 5. Certifcate of Status Desired | • | ee Rec | |
| City & State | City & State | | | 6. Election Campaign Financing | \$: | 5.00 N | vlay Be |
| 23 | 28 | | | Trust Fund Contribution | A | dded to | Fees |
| Zip Country | Zip · | Country | | 8. This corporation owes the current year | | | _ |
| [] | 9 30 | <u> </u> | | Personal Property Tax. | □ Ye | | □No |
| 9. Name and Address of Current Re | gistered Agent | | r | 10. Name and Address of New Registere | d Agent | | |
| COLDMAN IOTI I | | 81 | Name | | | | |
| GOLDMAN, JOEL K | | 82 Street Add | | Address (P.O. Box Number is Not Acceptable) | • | | ~ |
| LEGAL DEPT. 9TH FLOOR | | | | | | | |
| 2601 S BAYSHORE DR | | 83 | | | | | |
| MIAMI FL 33133 | | 84 | City | F | 85 | Zip C | ode |
| Pursuant to the provisions of Sections 607.0502 and office or registered agent, or both, in the State of Flaggent. I am familiar with, and accept the obligations SIGNATURE Signature, typed or printed name of registered agent and | orida. Such change was autho of, Section 607.0505, Florida | Statutes | tne corpo | corporation submits this statement for the purpose ration's board of directors. I hereby accept the appropriate the submit of the purpose ration's board of directors. I hereby accept the appropriate the submit of the purpose ration's board of directors. | of chang ointmen | ing its r t as reg | egistered istered |
| 12. OFFICERS AND D | | 13. | | ADDITIONS/CHANGES TO OFFICERS | ND DIF | RECTOR | RS IN 12 |
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| 1 9. | ☐ DELETE | 1.1 TITLE 1.2 NAME | | | | hange | |
| | ☐ DELETE | | r address | | | hange | |
| NAME JEFFREY, THOMAS W. STREET ADDRESS 2601 S. BAYSHORE DRIVE | _ | 1.2 NAME | j | | | | Addition |
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| NAME JEFFREY, THOMAS W. STREET ADDRESS CITY-ST-ZIP MIAMI FL. TITLE VAS | _ | 1.2 NAME 1.3 STREET 1.4 CITY-S | j | | | | Addition |
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6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

2601 S BAYSHORE DR

MIAMI FL 33133

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.

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90051 015 ***158.75