

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

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90118 037 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 566810

1. Corporation Name

FIVE POINTS TITLE SERVICES CO., INC.

Principal Place of Business

Mailing Address

8014 SW 135th Street Road
Ocala, FL 34473

8014 SW 135th Street Road
Ocala, FL 34473

(THIS IS A CHANGE OF ADDRESS*****)

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/78

4. FEI Number

59-1811722

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Nancy Roche
8014 SW 135th Street Road
Ocala, FL 34473

(NEW ADDRESS)

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

8014 SW 135th Street Road

83

84 City
Ocala,

FL

85 Zip Code
34473

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

Nancy Roche, President

2/19/99

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☒ DELETE
NAME Cortright, Earle D. Jr.
STREET ADDRESS 999 Brickell Ave, Suite 700
CITY-ST-ZIP Miami, FL 33131

1.1 TITLE Treasurer & Director ☐ Change ☒ Addition
1.2 NAME Donald O. McNeiley
1.3 STREET ADDRESS 8014 SW 135th Street Road
1.4 CITY-ST-ZIP Ocala, FL 34473

TITLE P ☐ DELETE
NAME Nancy Roche
STREET ADDRESS 999 Brickell Avenue, Suite 700
CITY-ST-ZIP Miami, FL 33131

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 8014 SW 135th Street Road
2.4 CITY-ST-ZIP Ocala, FL 34473

TITLE SD ☐ DELETE
NAME Sharon J. Hummerhielm
STREET ADDRESS 999 Brickell Avenue, Suite 700
CITY-ST-ZIP Miami, FL 33131

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

TITLE VD ☒ DELETE
NAME David M. Harden
STREET ADDRESS 999 Brickell Avenue, Suite 700
CITY-ST-ZIP Miami, FL 33131

4.1 TITLE Vice President & Director ☐ Change ☒ Addition
4.2 NAME Antony Gram
4.3 STREET ADDRESS 8014 SW 135th Street Road
4.4 CITY-ST-ZIP Ocala, FL 34473

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Assistant Secretary ☐ Change ☒ Addition
5.2 NAME Beth Smith
5.3 STREET ADDRESS 8014 SW 135th Street Road
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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:

Nancy Roche, President

2/19/99

352-307-8100

Date

Daytime Phone #

CR2E034 (11/98)