2002 UNIFORM BUSINESS REPORT (UBR)

May 06, 2002 8:00 am Secretary of State 654679 DOCUMENT # 1. Entity Name 05-06-2002 90066 039 ***158.75 AMERICAN PIONEER TITLE INSURANCE COMPANY Principal Place of Business Mailing Address 493 E.SEMORAN BLVD. 493 E.SEMORAN BLVD. CASSELBERRY FL 32707 CASSELBERRY FL 32707 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1971665 Not Applicable Zip Country Zip Country \$8.75 Additional Х 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **INSURANCE COMMISSIONER** Street Address (P.O. Box Number is Not Acceptable) THE CAPITAL BLDG. TALLAHASSEE FL 32301 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (9/01) ☐ Addition TITLE ☐ Defete TITLE Change NAME HAUGHTON, WALTER ROGER NAME STREET ADDRESS 601 MONTGOMERY STREET STREET ADDRESS CITY-ST-ZIP SAN FRANCISCO CA 94111 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME Lassiter, roy w STREET ADDRESS STREET ADDRESS 493 E.SEMORAN BLVD. CITY-ST-ZIP CITY-ST-ZIP CASSELBERRY FL TITLE ☐ Delete TITLE VSD Change Addition NAME NAME Daniels, George P STREET ADDRESS STREET ADDRESS 493 E.SEMORAN BLVD. CITY-ST-ZIP CITY-ST-ZIP CASSELBERRY FL TITLE ☐ Delete VD. TITLE Change Addition NAME RUMSEY, STEPHEN T NAME STREET ADDRESS STREET ADDRESS 493 E.SEMORAN BLVD. CITY-ST-ZIP CITY-ST-7IP CASSELBERRY FL 32707 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME FULFORD, III, JOHN H NAME STREET ADDRESS 601 MONTGOMERY ST STREET ADDRESS CITY-ST-ZIP SAN FRANCISCO CA 94111 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LORENZEN, JOHN MARTIN NAME

13. 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 report or supplemental 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 11 or Block 12 if QURECEPT P. Daniels

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

601 MONTGOMERY STREET

SAN FRANCISCO CA

STREET ADDRESS

CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

407-2<u>60-8050</u>

FILED

ATTACH # 654679 | 647511

AMERICAN PIONEER

TITLE INSURANCE COMPANY

2002 UNIFORM BUSINESS REPORT ADDITIONAL OFFICERS AND DIRECTORS OF AMERICAN PIONEER TITLE INSURANCE COMPANY

The names and addresses of additional officers and/or directors for American Pioneer Title Insurance Company are as follows: Barbara L. Allen 493 E Semoran Blvd Casselberry FL 3270 Richard M. Jett 493 E. Semoran Blvd Casselberry, Fl 32707 Barry J. Mazer \ 493 E. Semoran Blvd. Casselberry, Fl 32707 William E. Sussman 493 E. Semoran Blvd. Casselberry, FL 32707 Peter H. Johnson 493 E. Semoran Blvd. Casselberry, FL 32707 Claude J. Seaman

601 Montgomery Street San Francisco, CA 94111