

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

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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 811066 (0)

1. Corporation Name

NATIONS TITLE INSURANCE OF NEW YORK INC.



Principal Place of Business

111 CHURCH ST.  
WHITE PLAINS NY 10601

Mailing Address

1400 OLD COUNTRY RD.  
SUITE 104  
WESTBURY NY 11590

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

05/29/1956

3a. Date of Last Report

05/01/1995

4. FET Number

11-0907410

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER  
THE CAPITAL  
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and the corporation

(If the Registered Agent Signature is required, attach a separate page)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME ALEXANDER, RICHARD A.  
STREET ADDRESS 18201 VON KARMAN AVE.  
CITY-STATE-ZIP IRVINE CA ☐ DELETE

TITLE SVD  
NAME LIKENS, CHRIS M.  
STREET ADDRESS 6800 COLLEGE BLVD.  
CITY-STATE-ZIP OVERLAND PK KS ☒ DELETE

TITLE TV  
NAME DILTZ, JAMES C.  
STREET ADDRESS 6800 COLLEGE BLVD.  
CITY-STATE-ZIP OVERLAND PK KS ☐ DELETE

TITLE D  
NAME BAGWELL, MARVIN N.  
STREET ADDRESS 111 CHURCH ST.  
CITY-STATE-ZIP WHITE PLAINS NY ☐ DELETE

TITLE D  
NAME HUEMME, PETER F.  
STREET ADDRESS 1400 OLD COUNTRY RD. STE. 104  
CITY-STATE-ZIP WESTBURY NY 11590 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP ☐ Change ☐ Addition

2.1 TITLE AS  
2.2 NAME BARBARA COLEMAN  
2.3 STREET ADDRESS 6800 COLLEGE BLVD.  
2.4 CITY-STATE-ZIP OVERLAND PK KS 66211 ☐ Change ☒ Addition

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

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*Peter F. Huemme*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER F. HUEMME

4/25/96

(516) 876-7343

CR2E034 (12/95)

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**NATIONS TITLE INSURANCE OF NEW YORK INC.**

1400 Old Country Road, Suite 104 • Westbury, NY 11590  
Phone (516) 997-1636 • Fax (516) 997-3079

**ATTACHMENT TO FLORIDA CORPORATION  
ANNUAL REPORT 1995**

**OFFICERS**

**Vice Presidents**

E. Wayne Johnston	333 South Anita Dr.	Orange	CA	92668
Henry R. Kellermann	6301 Ivy Ln.	Greenbelt	MD	20770
Paul J. Moran	100 W. Clarendon	Phoenix	AZ	85013

**DIRECTORS**

Carmela DelVecchio	111 Church St.	White Plains	NY	10601
Henri J. Van Hirtim	514 Shatto Pl.	Los Angeles	CA	90020