

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000001556

1. Entity Name  
FLORIDA TITLE EXPRESS, LTD.

Principal Place of Business  
2000 PGA BOULEVARD, SUITE 3206  
PALM BEACH GARDENS FL 33408

Mailing Address  
1555 PALM BEACH LAKES BOULEVARD, STE 1000  
WEST PALM BEACH FL 33401-2328

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 28 AM 3:05



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
3301 Boynton Beach Blvd

3. Mailing Address

Suite, Apt. #, etc.  
Suite 1

Suite, Apt. #, etc.

City & State  
Boynton Beach FL

City & State

4. FEI Number 65-0847469

Applied For  
Not Applicable

Zip 33436 Country Palm Beach

Zip Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

UNIVERSAL LAND TITLE, INC.  
1555 PALM BEACH LAKES BLVD., SUITE 1000  
WEST PALM BEACH FL 33401

## 7. Name and Address of New Registered Agent

Name

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

City

FL

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. \$7,500.00

10. Amount of Capital Contributions in FLORIDA to date. \$7,500.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

## 12. GENERAL PARTNER INFORMATION

DOCUMENT # H93554  
NAME UNIVERSAL LAND TITLE, INC.  
STREET ADDRESS 1555 PALM BEACH LAKES BLVD., STE 1000  
CITY - ST - ZIP WEST PALM BEACH FL 33401

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## 13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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STREET ADDRESS

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-05/25/00--01086--021  
\*\*\*\*150.00 \*\*\*\*150.00

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Michael E. (Signature) Pres as GP 4/27/2000 561-689-8200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/99)