

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Apr 24 1996 8:00 am  
Secretary of State

DOCUMENT # F64742 (2)

1. Corporation Name

ALDAY/DONALSON TITLE COMPANY, INC.

Principal Place of Business

311 NOLAND DRIVE, SUITE D  
P.O. BOX 2030  
BRANDON FL 33511

Mailing Address

311 NOLAND DRIVE, SUITE D  
P.O. BOX 2030  
BRANDON FL 33511

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

ALDAY, THOMAS T., JR.  
311 NOLAND DRIVE, SUITE D  
BRANDON FL 33511

3. Date Incorporated or Qualified  
01/26/1982

3a. Date of Last Report  
05/01/1995

4. FEI Number

59-2164749

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

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 signatory and title, if applicable

Signature, typed or printed name of signatory and title, if applicable

(Print)

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETE

NAME ALDAY, THOMAS T., JR.  
STREET ADDRESS 311 NOLAND DR., SUITE DD  
CITY-ST-ZIP BRANDON FL

TITLE PD ☐ DELETE

NAME DONALSON, RONALD M.  
STREET ADDRESS 311 NOLAND DR., SUITE D  
CITY-ST-ZIP BRANDON FL

TITLE D S T ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

3925 Moores Lake Rd.  
Dover, FL 33527

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

16510 WB Pritchett Lane  
Lutz, FL 33549

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

D S T  
Becky M. Halcom  
1320 S. Taylor Rd.  
Seffner, FL 33584

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

D V  
Kathy M. Burgner  
7904 George Washington Lane  
Tampa, FL 33617

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

Becky M. Halcom  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813 685-4576  
Daytime Phone #

CR2E034 (12/95)