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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F78176

FIRST TITLE SERVICES OF TALLAHASSEE, INC.

Principal Prace of Business Mailing Address									
1400 METROPOLITAN BLVD. 1400 METROPOLITAN BL TALLAHASSEE FL 32308 TALLAHASSEE FL 32308-									
						3. Date incorporated or Qualifie 04/28/1982		e of Last R)5/1996	eport
2. Prir cipal F	Place of Business	2a. Mailing Address				4. FEI Number			oplied For
21		26				59-2189041			ot Applicable
Surte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State		City & State				6. Election Campaign Financing	·	\$5.00	May Re
23		28				Trust Fund Contribution		Added I	
Zip	Country	Zip		untry		8. This corporation has liability f			. 199.032
24	25	29	30			Florida Statutes	Yes [
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New	Hegistered A	gent	
WADDILL, JOHN B.									
	00 METROPOLITAN BLVD. LLAHASSEE FL 32308				Street Addr	ress (P.O. Box Number is Not Acceptable)			
17%	CDA MODEL (E OCOO			63		· · · · · · · · · · · · · · · · · · ·			
				84	City		F*1	85 Zip (Code
4 0	La Name of Cod one COZ OF	20 and 607 4500 Florida Ctat	doo the		nomed com	protion pulpoits this statement for th	FL	obonoina II	lo registered
office or i agent. La	to the provisions of Sections 607,050 registered agent, or both, in the State an familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, F	authoriz Torida Sta	ed by t atutes.	he corporat	ion's board of directors. I hereby ac	cept the appo	intment as	registered
S:GNATURE	Sagaretine type and printed name of registered ag	117	NTC Florida			ed when reinstating)	DATE	,	
12.		ID DIRECTORS	13		eignature reduk	ADDITIONS/CHANGES TO OF		DIRECTOR	RS IN 12
Tillf	PTVD			1.1 TITLE				Change	Addition
NAME	WADDILL, JOHN B.		12	NAME					ĺ
STREET ADDRESS	3321 ROBINHOOD RD.		1.3	STREET AC	DDRES\$				
CHY-SI-2d*	TALLAHASSEE FL		1.4	CITY - ST-	ZIP				
TITLE		☐ DELETE	2.1	TITLE				Change	Addition
NAIAI	1		2.2	NAME					j
STREET ADDRESS	İ		2.3	STREET AC	DDRESS				ŀ
C-TY - ST - ZIP				CITY-ST-	ZIP				
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NAM:				NAME CZOCCY AL	DDDCCC				ļ
STREET ADDRESS	}		- 1	STREET AL					[
THEE		DELETE		CITY-ST- TITLE	ZIF"			Change	Addition
TTT J. C.		Fred Drivelle	u.,	111 LC	1			The country of	routeon

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 indicared 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 true corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if changed

NAMI STREET ACCRESS

OTY-SE ZIE

FILED

Apr 28 1997 8:00am

Secretary of State