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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600000806 (7)

MID-SOUTH TITLE CORPORATION

6630 W. BROAD ST. RICHMOND VA 23230				6630 W. BROAD ST. RICHMOND VA 23230-1702												
									3.	3. Date Incorporated or Qualified 3a. Date of Last Report 02/19/1996				port		
2.	Principal Pla	ace of Busin	ness	2a. Mailing Address					4.	FEI Number				App	olied For	
21			26						62-0784718 Not Applicable				Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5.	Certificate of Status De	sired				dditional			
City & State			City & State										quired			
23	_			28				6.	Election Campaign Fina Trust Fund Contribution	_	П			May Be Fees		
23	Zip	Country Zip				Country										
24	•-		25	F1	29 30				8. This corporation has liability for intar Florida Statutes				•			
		9. Name	and Address of Curre						10.	10. Name and Address of New Registered Agent						
	SLO	AN, F. LIN	ITON JR.				81	Name						•		
100 N. TAMPA ST., STE. 2050					l			Cinnel	A al al 75	O O O Day No.	A 1 - 1 -	I - X				
TAMPA FL 33602-2050								Street	Address (F	P.O. Box Number is Not	Acceptab	10)				
	****						83		-							
								600					1T			
							84	City				FL	85	Zip C	ode	
11	. Pursuant to	the provis	ions of Sections 607.05	02 and 607.1508, f	Iorida Statut	les, the a	bove	-named	corporatio	on submits this statemen	for the p	urpose of	chang	ing its	registered	
	agent. I an	egistered açını n familiar w	jent, or both, in the Stat ith, and accept the obli	e of Florida. Such c pations of, Section	change was a 607.0505. Ek	authorize orida Stat	d by tutes	the con	poration's l	board of directors. I here	by accep	t the appo	inlmei	nt as r	egistered	
SI	GNATURE		,													
Signature, typud or printed name of registereo agent and title it applicable (INOTE) Fingiste												DAIL				
12			OFFICERS AN	ND DIRECTORS	-	13.	,		,	ADDITIONS/CHANGES	TO OFFIC		_			
TIT		C	01140150 II IB	L	DELETE	1.1 TI	TLF		Direc	ctor		ţ	X J Cha	inge	ncitibbA 🔲	
NA	FOSTER, CHARLES H JR.			1.2 N		AME										
		6630 W. BROAD ST.			1.3 \$		IRECT	ET ADDRESS								
	RICHMOND VA 23230		NU VA 23230				.4 CHY-ST-ZIP		ļ			. ,				
TIT			L	☐ DELETE 2.13		1LE		Director/President		t	ļ	X J Cha	nge	Addition		
	ME ALPERT, JANET A			221		2 NAME		}								
STF	TREET ADDRESS 6830 W. BROAD ST.		2.3 5		STREET ADDRESS											
_	RICHMOND VA 23230						TY-ST-7IP									
TIT		D	NIADI EO 111	L.	DELETE	3.1 ไ						ŀ	Cha	inge	Addition	
NAI	1		CHARLES W			3 2 N	AME									
_	REET ADDRESS		BROAD ST.			- 1		ADDRESS	1							
_	Y-\$T-ZIP	HICHMU	ND VA 23230		M			I · ZiP								
TIT	1	A	IAMES I	<u>[2</u>	DELETE	4.1 TI						l	Cha	inge	☐ Addition	
NAI		•	JAMES L			4. 2 N										
STREET ADDRESS 1200 ONE COMMERCE DITY-ST-7IP MEMPHIS TN 38103			1.0		4.3 S	REET	ADDRESS									
_	Y-ST-ZIP	-	5 IN 38103		7		IY · S	I - ZIP							-	
TiT		S	IOUN M	L	DELETE	5 1 TI						l	Cha	nge	Addition	
NA	- 1		, JOHN M			52N										
	REET ADDRESS		BROAD ST.			5381	IREE1	ADDRESS								
_	Y-ST-ZIP	HICHMU	ND VA 23230		7 52.75		1Y-S	1 - 718							П.	
TIT		1	A 148111414	L] DELETE	6171						ļ	Cha	inge	Addition	
NA	ME		G. WILLIAM			6.2 N	AME									
STE	REET ADDRESS		BROAD ST.		638			ADDRESS	i 4							
			MII VA 9399A						1							

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 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

Mull

John M. Carter, Secretary 804-281-6811

FILED

Apr 29 1997 8:00am

Secretary of State