

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

FILED

Feb 02 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # H05655 (6)  
1. Corporation Name  
INDEPENDENT ABSTRACT AND TITLE COMPANY

Principal Place of Business  
600 WHITEHEAD ST  
STE. 203  
KEY WEST FL 33040  
US

Mailing Address  
600 WHITEHEAD ST  
STE. 203  
KEY WEST FL 33040  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
05/24/1984  
4. FEI Number  
59-2413414  
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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
25  
2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country  
30

9. Name and Address of Current Registered Agent

B G CARTER  
525 CAROLINE STREET  
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
600 Whitehead Street, Suite 203  
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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
1. STMD  
CARTER, B.G.  
LONG BEN LANE  
CUDJOE KEY FL  
2. VP  
HOLLIDAY-BAKER, RUTH K  
RT. 4, BOX 329B  
SUMMERLAND FL  
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
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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 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: B A Carter REQUIRED

1/20/98 (305) 294-5105

CR2E034 (10/97)