

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H30572

FILED
Aug 21, 2003
Secretary of State

Entity Name: HILLSBOROUGH TITLE, INC.

Current Principal Place of Business:

504 E. BAKER ST.
PLANT CITY, FL 33566 US

New Principal Place of Business:

504 E. BAKER ST.
PLANT CITY, FL 33563 US

Current Mailing Address:

504 E. BAKER ST.
PLANT CITY, FL 33566 US

New Mailing Address:

504 E. BAKER ST.
PLANT CITY, FL 33563 US

FEI Number: 59-2465719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGRATH, GAIL C
1007 E SANDALWOOD DRIVE N
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

MCGRATH, GAIL C
1007 E SANDALWOOD DRIVE N
PLANT CITY, FL 33563 US

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: GAIL C. MCGRATH

08/21/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: MCGRATH, GAIL C
Address: 1007 E. SANDALWOOD DRIVE N
City-St-Zip: PLANT CITY, FL 33566 US

Title: S () Delete
Name: DAVIS, AARON M
Address: 1007 E. SANDALWOOD DRIVE N.
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: MCGRATH, GAIL C
Address: 1007 E. SANDALWOOD DRIVE N
City-St-Zip: PLANT CITY, FL 33563 US

Title: VP (X) Change () Addition
Name: DAVIS, AARON M
Address: 1302 VICTORIA ST
City-St-Zip: PLANT CITY, FL 33563 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON M. DAVIS

VP

08/21/2003

Electronic Signature of Signing Officer or Director

Date