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

CORPORATION ANNUAL REPORT

1998

SIGNATURE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

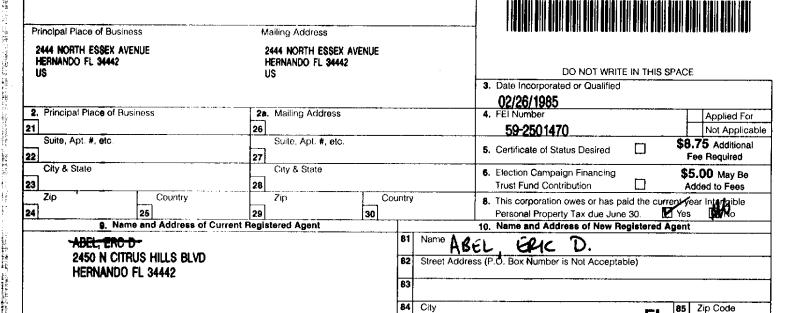
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name H44408

(3)

MANATEE TITLE COMPANY, INC.

Γ IL Γ D			
May 1	18 19	988	:00am
Sec	retary	of S	State



11. Parsuant 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, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE TITLE 1.1 TOLE Change Addition ABEL, ERIC D NAME 12 NAME 2450 N CITRUS HILLS BLVD STREET ADDRESS 1.3 STREET ADDRESS HERNANDO FL CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE TITLE ŠTD Change ☐ Addition 2.1 TITLE PASTOR, JOHN E NAME 2.2 NAME 2050 N. BRENTWOOD CIR STREET ADDRESS 2 3 STREET ADDRESS LECANTO FL CITY-ST-ZIP 2 4 City-St-ZIP TITLE DELETE 31 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE

6.4 CITY-ST-ZIP 14. Thereby certify that the information europed with this filing coes indicated on this annual report or supplemental annual report is officer or director of the corporation or the receiver or truffee em Block 12 or Block 13 inchanged, or on an ultractivent with anyact ot qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is fue and accurate and that my signature shall have the same legal effect as if made under oath, that I am an lifted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

Change

Addition