

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
OFFICE OF THE SECRETARY
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

55 MAY -1 AM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J29242

(1)

FIRST FINANCIAL TITLE COMPANY OF FLORIDA

1. Name of Corporation	2. State of Incorporation
2627 N.E. 203RD ST., #111 % GEORGIA MCWILLIAMS N MIAMI FL 33180 US	2627 N.E. 203RD ST., #111 % GEORGIA MCWILLIAMS N MIAMI FL 33180 US
3. Date of Incorporation	4. Date of Annual Report
08/15/1986	06/21/1994
5. Filing Number	6. Filing Fee
76-0194596	\$8.75 Additional Fee Required
7. Certificate of Incorporation	8. Certificate of Amendment
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PAPPAS, TIMOTHY 100 N BISCAYNE BLVD IVES DAIRY RD. MIAMI FL 33132	

3. Date of Incorporation	4. Date of Annual Report
08/15/1986	06/21/1994
5. Filing Number	6. Filing Fee
76-0194596	\$8.75 Additional Fee Required
7. Certificate of Incorporation	8. Certificate of Amendment
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PAPPAS, TIMOTHY 100 N BISCAYNE BLVD IVES DAIRY RD. MIAMI FL 33132	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PAPPAS, TIMOTHY 100 N BISCAYNE BLVD IVES DAIRY RD. MIAMI FL 33132	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the report of the corporation as required by law, and that the same has been filed with the Department of State, Tallahassee, Florida.

12. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the report of the corporation as required by law, and that the same has been filed with the Department of State, Tallahassee, Florida.

12. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the report of the corporation as required by law, and that the same has been filed with the Department of State, Tallahassee, Florida.	13. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the report of the corporation as required by law, and that the same has been filed with the Department of State, Tallahassee, Florida.
PD KAYTON, DAVID 2128 NORTH BAY RD. MIAMI BCH. FL DVT PAPPAS, TIMOTHY 100 N. BISCAYNE BLVD. MIAMI FL D PAPPAS, MARIE 100 N BISCAYNE BLVD MIAMI FL D PAPPAS, MICHAEL 100 N BISCAYNE BLVD MIAMI FL V KAYTON, MATTHEW 16485 COLLINS AVE., PH 34-C MIAMI BCH FL	

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the report of the corporation as required by law, and that the same has been filed with the Department of State, Tallahassee, Florida.

SIGNATURE: MATTHEW KAYTON
SIGNATURE AND AFFIDAVIT OF PRINTED NAME OF SIGNING OFFICER OR OFFICIAL

2128 N BAY ROAD
MIAMI BEACH, FL 33140

4-27-95 305-935-5887

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **J29408** (8)

1. Corporation Name:

WORLEY, HUMPHREY & BALL, INC.

Principal Place of Business:

**9500 S. DADELAND BLVD
#200
MIAMI FL 33156
US**

Mailing Address:

**P. O. BOX 561567
MIAMI FL 33256-1567
US**

APPROVED
JTB

RECEIVED
MAY 1 1995 3:57

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:

21 State: Apt # etc:

22 City & State:

23 City & State:

24 City & State:

2a. Mailing Address:

26 State: Apt # etc:

27 City & State:

28 City & State:

29 City & State:

3. Date Incorporated or Qualified:

08/19/1986

3a. Date of Last Report:

05/31/1994

4. FEI Number:

59-2776540

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 has liability for intangible tax under § 199.022,
Florida Statutes:

☒ Yes ☐ No

9. Name and Address of Current Registered Agent:

**WORLEY, J. HAYES JR.
9500 S DADELAND BLVD
STE 200
MIAMI FL 33156**

10. Name and Address of New Registered Agent:

81 Name:

82 Street Address (P.O. Box Number is Not Acceptable):

83 City:

84 City:

FL

85 Zip Code:

11. Pursuant to the provisions of Sections 607.07(2)(b) and 607.15(2)(b), 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 607.05(2), Florida Statutes.

SIGNATURE:

Signature of Registered Agent or Registered Agent in Charge:

Signature of New Registered Agent (if applicable):

Date:

12. OFFICERS AND DIRECTORS:

12.1 NAME	DP WORLEY, JACK H.
12.2 STREET ADDRESS	464 S. DIXIE HWY.
12.3 CITY, ST, ZIP	CORAL GABLES FL
12.4 NAME	DVP HUMPHREY, HAROLD M.
12.5 STREET ADDRESS	464 S. DIXIE HWY.
12.6 CITY, ST, ZIP	CORAL GABLES FL
12.7 NAME	DVP WORLEY, J. HAYES JR.
12.8 STREET ADDRESS	464 S. DIXIE HWY.
12.9 CITY, ST, ZIP	CORAL GABLES FL
12.10 NAME	DST BALL, CHARLES C.
12.11 STREET ADDRESS	464 S. DIXIE HWY.
12.12 CITY, ST, ZIP	CORAL GABLES FL
12.13 NAME	
12.14 STREET ADDRESS	
12.15 CITY, ST, ZIP	
12.16 NAME	
12.17 STREET ADDRESS	
12.18 CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

13.1 NAME	☒ Change ☐ Addition
13.2 NAME	Delete - Retired
13.3 STREET ADDRESS	
13.4 CITY, ST, ZIP	
13.5 NAME	☒ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	9500 So. DADELAND BLVD, #200
13.8 CITY, ST, ZIP	MIAMI, FLA. 33156
13.9 NAME	☒ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	9500 So. DADELAND BLVD, #200
13.12 CITY, ST, ZIP	MIAMI, FLA. 33156
13.13 NAME	☒ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	9500 So. DADELAND BLVD, #200
13.16 CITY, ST, ZIP	MIAMI, FLA. 33156
13.17 NAME	☐ Change ☒ Addition
13.18 NAME	
13.19 STREET ADDRESS	8 LYONS, PHILLIP C
13.20 CITY, ST, ZIP	9500 So. DADELAND BLVD, #200
13.21 NAME	☐ Change ☐ Addition
13.22 NAME	
13.23 STREET ADDRESS	
13.24 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(2)(b), Florida Statutes. I further certify that the information submitted on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and make under oath. That I am an officer or director of the corporation, or the manager or trustee empowered to execute this report as required by Chapter 197, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in supplemental report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES C. BALL

Charles C. Ball
Secretary

3/1/95 (305) 670-6111