

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90136 029 ***150.00

DOCUMENT # J68143

1. Entity Name

BRADFORD TITLE SERVICES, INC.

Principal Place of Business

W GEORGIA STREET
 P.O. BOX 209
 STARKE FL 32091

Mailing Address

POST OFFICE BOX 208
 P. O. BOX 209
 STARKE FL 32091-1030
 US

2. Principal Place of Business

3. Mailing Address

P.O. Drawer 1030

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Starke, FL

4. FEI Number

59-2839604

Applied For

Not Applicable

Zip

Country

Zip

Country

32091

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARDY, DUDLEY P.
 998 NORTH TEMPLE AVENUE
 STARKE FL 32091

7. Name and Address of New Registered Agent

Name

Dudley P. Hardy

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

403 W. Georgia St.

City

Starke,

FL

Zip Code

32091

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/28/00

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
 NAME HARDY, DUDLEY P.
 STREET ADDRESS 998 NORTH TEMPLE AVENUE
 CITY-ST-ZIP STARKE FL 32091 ☐ Delete

TITLE PD
 NAME Dudley P. Hardy
 STREET ADDRESS 403 W. Georgia St.
 CITY-ST-ZIP Starke, FL 32091 ☒ Change ☐ Addition

TITLE S/D
 NAME HARDY, BEVERLY B
 STREET ADDRESS 998 NORTH TEMPLE AVENUE
 CITY-ST-ZIP STARKE FL 32091 ☐ Delete

TITLE S/D
 NAME Beverly B. Hardy
 STREET ADDRESS 403 W. Georgia St.
 CITY-ST-ZIP Starke, FL 32091 ☒ Change ☐ Addition

TITLE S
 NAME ANDREWS, RANDAL W
 STREET ADDRESS ROUTE 4 BOX 917
 CITY-ST-ZIP STARKE FL ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/00 (904) 964-5701

Date Daytime Phone #

CR2E034 (9/99)