

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J75916

4-10-96 B-3364p -C
(3)

1. Corporation Name

SUNFIRST TITLE, INC.

Principal Place of Business

% RICHARD J. KAPLAN
1999 UNIVERSITY DR., S 402
CORAL SPRINGS FL 33071

Mailing Address

1999 UNIVERSITY DRIVE
SUITE 402
CORAL SPRINGS FL 33071
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

KAPLAN, RICHARD J.
1999 UNIVERSITY DR., SUITE 402
CORAL SPRINGS FL 33071

81 Name

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

83

84 City

3. Date Incorporated or Qualified

06/01/1987

3a. Date of Last Report

04/26/1995

4. FEI Number

59-2805921

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 s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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.

FL 85 Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and the corporation

Signature, typed or printed name of registered agent

Date

12. OFFICERS AND DIRECTORS

TITLE DPC
NAME KAPLAN, RICHARD J.
STREET ADDRESS 1999 UNIVERSITY DRIVE #402
CITY-STATE-ZIP CORAL SPRINGS FL

☐ DELETE

TITLE DV
NAME SCHARF, ROBERT D.
STREET ADDRESS 1999 UNIVERSITY DRIVE #402
CITY-STATE-ZIP CORAL SPRINGS FL

☐ DELETE

TITLE DVT
NAME WEINSTEIN, LAWRENCE
STREET ADDRESS 1999 UNIVERSITY DRIVE #402
CITY-STATE-ZIP CORAL SPRINGS FL

☐ DELETE

TITLE S
NAME WEINSTEIN, LAWRENCE
STREET ADDRESS 1999 UNIVERSITY DRIVE #402
CITY-STATE-ZIP CORAL SPRINGS FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE
2. NAME
3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD J. KAPLAN
PRES

1/17/96 954-752-6575
Date of Filing

CR2E034 (12/95)