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

PROFIT CORPORATION ANNUAL REPORT

1998



L'LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J89768

(2)

FILED
May 04 1998 8:00am
Secretary of State

ADVANCED TITLE RESEARCH, INC. Principal Place of Business 302 13TH AVE N P O BOX 753 ST PETERSBURG FL 33701 US	Mailing Address 202 13TH AVE N. ST. PETERSBURG FL 33 US	701	DO NOT WRITE IN TH 3. Date Incorporated or Qualified 08/25/1987	
2. Principal Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21	26	<u>-</u>	59-2852227	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State			Fee Required
23	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	7ip	Country	8. This corporation owes or has paid the	
24 25	29	30	Personal Property Tax due June 30.	Yes No
Name and Address of Currer			10. Name and Address of New Registers	
ROLLENHAGEN, RICK E. 202 13TH AVE N ST PETERSBURG FL 33701		83 84 City	ess (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions for fections 607.050 office or register of yearly orboth in the State agent, I am familiar with an I action the bull SIGNATURE Signature the drop physical purpose of the State of	ations of, Section 607.0505, Fl White E. Wolfe et and the Terpocable (NOT	orida Statutes. 💋		7/98
TITLE PTVS	DELETE	11 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME ROLLENHAGEN, RICK E.		1.2 NAME		
STREET ADDRESS 202 13TH AVE N		1.3 STREET ADDRESS		
CITY-ST-ZIP ST PETERSBURG FL		1.4 CITY+ST-ZIP		
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	D or see	2.4 CITY-ST-ZIP		
TITLE	∐} DEL ete	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	3.4. C(TY - ST - ZIP 4.1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-SI-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	L_ DELETE	61 TITLE		Change Addition
NAME		6.2 NAME		l
STREET ADDRESS		6.3 STREET ADDRESS		
14. I hereby certify that the ippormator supplied w	ith this filing dose not qualify 6	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further	cortify that the information
indicated on this annual report or duriplementa officer or director of the conficient of the rece	al annual report is true and acc	curate and that my signatur	re shall have the same legal effect as if made	under oath; that I am an

Breident - Rick E. Rollon hujen