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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # K48993

1. Corporation Name

(5)

GULFCOAST TITLE INSURANCE AGENCY, INC.

/O KIM K. PR ISO TAMIAMI T. CHARLOTTI	TR., UNIT B	Mailing Address C/O KIM K. PROPP 2450 TAMIAMI TR., UNIT B PT. CHARLOTTE FL 33952-3949						
\$		US			3. Date Incorporated or Qualified 3a. Date of Last Report 12/05/1988 04/30/1996			Report
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number		Applied For	
Suite, Apt. #, etc.		26 Suite, Apt. #, etc. 27						ot Applicable
					5. Certificate of Status Desired Section Fee Required			
Orty & Stat	c	City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z _I p	Country	Zip	Countr	У	8. This corporation has liability for			
<u>]</u>	25	29	30			Yes 🗌		
	9. Name and Address of Curre	ent Registered Agent			10, Name and Address of New R	egistered A	gent	
	PP, KIM K		81	Name				
2450 TAMIAMI TR. UNIT B			82	2 Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
	CHARLOTTE FL 33952		8	3				
			84	4 City		FI	85 Zip	Code
	07.00	-00 1 CO7 1500 Florida Ctat	1-0-4		poration submits this statement for the tion's board of directors. I hereby according		hansina	te conintered
GNATURE	Stgriature 155 and or printed name of registered a	gent and title it applicable. (NO	lorida Statute		red when reinstating)	DAYE		
2.	OFFICERS A			gent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
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SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or oil an attachment with an

4.24-97 (941)624-2535~

FILED

May 01 1997 8:00am

Secretary of State

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