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Apr 09 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K93681** (0)  
1. Corporation Name  
**PRESTIGE TITLE SERVICES INC.**



Principal Place of Business <b>6220 MANATEE AVE., W. SUITE 201 BRADENTON FL 34209 US</b>	Mailing Address <b>6220 MANATEE AVE., W. SUITE 201 BRADENTON FL 34209-2361 US</b>
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3. Date Incorporated or Qualified <b>06/08/1989</b>	3a. Date of Last Report <b>04/22/1996</b>
4. FEI Number <b>65-0124128</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>CASEY, JOHN R. 6220 MANATEE AVE., W. SUITE 201 BRADENTON FL 34209</b>		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	<b>FL</b> 85. Zip Code

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstalling) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	PTD
NAME	<b>HILEMAN, JEAN H</b>	1.2 NAME	<b>DAVIS, JEAN H</b>
STREET ADDRESS	<b>7515 22ND AVE W</b>	1.3 STREET ADDRESS	<b>5108 2nd Ave NW</b>
CITY-ST-ZIP	<b>BRADENTON FL</b>	1.4 CITY-ST-ZIP	<b>BRADENTON FL 34209</b>
TITLE	SVD	2.1 TITLE	
NAME	<b>CEDAR, MARY A.</b>	2.2 NAME	
STREET ADDRESS	<b>3912 99TH STREET WEST</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BRADENTON FL</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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: **Jean H Davis** PTD  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date: **4/3/97** Daytime Phone #: **(941) 7957779**

CR2E034 (9/96)