

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

FILED

Jan 23 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L22848 (0)

1. Corporation Name
EQUITY TITLE COMPANY/SOUTHEAST

Principal Place of Business

4830 W. KENNEDY BLVD.
#595
TAMPA FL 33609
US

Mailing Address

4830 W. KENNEDY BLVD.
#595
TAMPA FL 33609-2562
US3. Date Incorporated or Qualified
10/16/19893a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 2605 ENTERPRISE RD E.

Suite, Apt. #, etc.

22 # 150

City & State

23 Clearwater FL

Zip

24 34619

Country

2a. Mailing Address

26 2605 ENTERPRISE RD E

Suite, Apt. #, etc.

27 # 150

City & State

28 CLEARWATER FL

Zip

29 34619

Country

30

4. FEI Number
59-2974176Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

ROSSO, JOHN P
4830 W. KENNEDY BLVD. #595
SUITE 595
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name
NICKOLAS W. GRAHAM
82 Street Address (P.O. Box Number is Not Acceptable)
2605 ENTERPRISE RD. EAST
83 # 150
84 City
CLEARWATER
85 Zip Code
FL 34619

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

✓ Nicholas W. Graham

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BAUMGART, WILLIAM H.
STREET ADDRESS 4830 WEST KENNEDY BLVD STE 595
CITY - ST - ZIP TAMPA FL
DELETETITLE D
NAME BAUMGART, DEBBIE
STREET ADDRESS 4830 W. KENNEDY BLVD. STE 595
CITY - ST - ZIP TAMPA FL
DELETETITLE P
NAME ROSSO, JOHN P
STREET ADDRESS 4830 W. KENNEDY BLVD.
CITY - ST - ZIP TAMPA FL 33609
DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 2605 ENTERPRISE RD E. # 150
1.4 CITY - ST - ZIP CLEARWATER FL 34619
Change Addition2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 2605 ENTERPRISE RD E # 150
2.4 CITY - ST - ZIP CLEARWATER FL 34619
Change Addition3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
Change Addition4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
P NICKOLAS W. GRAHAM
2605 ENTERPRISE RD E # 150
CLEARWATER FL 34619
Change Addition5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
Change Addition6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
Change Addition

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:

✓ Nicholas W. Graham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)