

**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 # **L66699 (4)**

1. Corporation Name

**ABSTRACTERS' TITLE COMPANY OF CENTRAL FLORIDA, INC.**



Principal Place of Business

Mailing Address

611 WYMORE ROAD  
SUITE 202  
WINTER PARK FL 32789  
US

611 WYMORE ROAD  
SUITE 202  
WINTER PARK FL 34761  
US

2. Principal Place of Business

2a. Mailing Address

21 2265 LEE RD.

26 2265 LEE RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 125

27 125

City & State

City & State

23 WINTER PARK FL.

28 WINTER PARK FL.

Zip

Country

Zip

Country

24 32789

25 US

29 32789

30 US

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/18/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3010423

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

81 Name

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

2265 LEE RD. SPC 125

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.05(2) 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, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.05(2), Florida Statutes.

SIGNATURE

Signature of officer or director of the corporation (Print name and title)

Signature of Registered Agent (Print name and address)

1/25/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: PST  
NAME: CHENELE, AL A.  
STREET ADDRESS: 611 WYMORE ROAD, SUITE 202  
CITY-ST-ZIP: WINTER PARK FL

11 TITLE:  Change  Addition  
12 NAME:  
13 STREET ADDRESS: 2265 LEE RD. SPC 125  
14 CITY-ST-ZIP:

TITLE: D  
NAME: CHENELE, AL A.  
STREET ADDRESS: 611 WYMORE ROAD, SUITE 202  
CITY-ST-ZIP: WINTER PARK FL

15 TITLE:  Change  Addition  
16 NAME:  
17 STREET ADDRESS: 2265 LEE RD SPC 125  
18 CITY-ST-ZIP:

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

19 TITLE:  Change  Addition  
20 NAME:  
21 STREET ADDRESS:  
22 CITY-ST-ZIP:

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

23 TITLE:  Change  Addition  
24 NAME:  
25 STREET ADDRESS: 200001792122  
26 CITY-ST-ZIP: -04/24/96-01018-030

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

27 TITLE:  Change  Addition  
28 NAME:  
29 STREET ADDRESS:  
30 CITY-ST-ZIP:

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

31 TITLE:  Change  Addition  
32 NAME:  
33 STREET ADDRESS:  
34 CITY-ST-ZIP:

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 trustee 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

1/26/96 407-628-2804

Date

Telephone #

CR2E034 (12/95)

4-23-96  
JR