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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

Corporation Name

DOCUMENT #

M90196

(0)

SUN TITLE & ABSTRACT CO. OF SOUTH FLORIDA, INC. Principal Place of Business Mailing Address 101 NORTH FEDERAL HWY. 101 NORTH FEDERAL HWY. **BOCA RATON FL 33432 BOCA RATON FL 33432** 3a. Date of Last Report 3. Date Incorporated or Qualified 07/19/1988 04/27/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 65-0060776 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State Oty & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country $Z_{\rm IP}$ Country 8. This corporation has liability for intangible tax under s. 199,032, 24 ☐ Yes ☐ No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HAGGERTY, DANIEL L. 82 Street Address (P.O. Box Number is Not Acceptable) 101 NORTH FEDERAL HIGHWAY **BOCA RATON FL 33432** 83 84 City 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 circctors. Thereby accept the appointment as registered agent. I am familiar with, and accept the oblightions of, Section 607,0505, Florida Statutes. SIGNATURE Styllations typed on protectiven erof registers it appear and time mapple at a CR2E034 (12/95) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1 1 10 6 Change Addition HAGGERTY, DANIEL NAME 1.2 NAME 101 N. FEDERAL HWY., STE. A STREET ADDRESS. 13 STREET ADDRESS **BOCA RATON FL** CITY - ST - ZIP 14 CHY SF-ZP TITLE FILDELETE 2 1 THE ☐ Change Add tion NOTESTEIN, BONNIE P. NAME 2.2 NAME 101 N. FEDERAL HWY., STE. A STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** C:TY-ST-ZIP 2.4 C(1Y - ST - Z)P DELETE TITLE 3 1 10 LF Change Add-tion NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY, SI-ZIP DELETE TITLE 4 1 HILE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY - ST - ZIP 4.4 City St-ZiP DELETE TIFLE Change 5 1 11116 Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6 1 Title 6 Change ☐ Addition NAMÉ 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 011Y - ST - 7IP 6.4 City - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quit 'y 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 early 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 if changed or an attachment with an address.

SIGNATURE:

AINTEO NAME OF SIGNING OFFICER OR DIRECTOR PROPERTY

4/28/96

40)-7500740