

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000001360

1. Entity Name

SE VISTA TITLE COMPANY

FILED
Mar 01, 2001 8:00 am
Secretary of State

01-30-2001 90136 027 ***150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

117 N.E. 5TH AVE.
DELRAY BEACH FL117 N.E. 5TH AVE.
DELRAY BEACH FL

2. Principal Place of Business

3. Mailing Address

354 N.E. 1st Avenue

354 N.E. 1st Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DeLray Beach Florida

DeLray Beach Florida

Zip

Country

Zip

Country

4. FEI Number

22-3700821

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
President & Shareholder <input type="checkbox"/> Delete	Vincent A Smyth	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
223 Bay Ave	Huntington, NY 11743		
Shareholder & Pres. <input type="checkbox"/> Delete	Edmund J.M. Smyth	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
33 Stealing Court	Huntington, NY 11743		
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Typed Name

CF2E034 (10/00)