

# 2001 UNIFORM BUSINESS REPORT (UBR)

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**FILED**  
**Mar 29, 2001 8:00 am**  
**Secretary of State**

03-14-2001 90521 022 \*\*\*158.75

DOCUMENT # P000000096905

1. Entity Name

City Title Services, Inc.

Principal Place of Business

Mailing Address

C/O Jason Zinno  
407 Lake Howell Rd.  
Maitland, FL 32751

407 Lake Howell Rd.  
Maitland, FL 32751

2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3678725

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Luckenbach, Baron R  
407 Lake Howell Rd.  
Maitland, FL 32751

Name

Jason J Zinno

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

407 Lake Howell Rd.

City

Maitland, FL 32751

FL

Zip Code

32751

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President  
Luckenbach, Baron R  
407 Lake Howell Rd.  
Maitland, FL 32751

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President/Secretary  
Luckenbach, Baron R  
407 Lake Howell Rd. Maitland, 32751

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President  
Zinno, Jason J  
407 Lake Howell Rd.  
Maitland, FL 32751

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President/Treasurer  
Zinno Jennifer M  
407 Lake Howell Rd.  
Maitland, FL 32751

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President  
DeHoop Brent  
407 Lake Howell Rd. Maitland, FL

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President  
DeHoop, Jill  
407 Lake Howell Rd.  
Maitland, FL 32751

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President  
Luckenbach, Beverly  
407 Lake Howell Rd.  
Maitland, FL 32751

Change 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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)