

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 09, 2002 8:00 am**  
**Secretary of State**

05-05-2002 90288 043 \*\*\*150.00

**DOCUMENT # P01000014189**

1. Entity Name  
**A & T TITLE GROUP, INC.**

Principal Place of Business  
**801 N. MAGNOLIA AVE., SUITE 402**  
**ORLANDO FL 32803-3851**

Mailing Address  
**801 N. MAGNOLIA AVE., SUITE 402**  
**ORLANDO FL 32803-3851**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3696742**

Applied For

Not Applicable

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

**HARGROVE, CHARLES D ESQ.**  
**801 N. MAGNOLIA AVE., SUITE 402**  
**ORLANDO FL 32803-3851**

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 ☐ Delete  
 NAME **PDST**  
 STREET ADDRESS **SAVAGE-GASTON, JOYCE**  
 CITY-ST-ZIP **801 N. MAGNOLIA AVE., SUITE 402**  
**ORLANDO FL 32803-3851**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

**SIGNATURE REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)



**TITLE GROUP INC.**

Accurate & Timely Real Estate  
Closing and Title Services

Attachment  
Document #  
P01000014189  

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38036

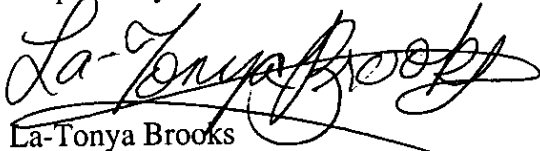
July 1, 2002

Department of State  
Division of Corporations

Re: A & T Title Group, Inc.  
Document #: P01000014189  
FEI: 59-3696742

Per instructions received via telephone conversation this date, enclosed herewith please find the signed 2002 Uniform Business Report with FEI number completed. This firm sent the 1<sup>st</sup> notice of filing along with a check for \$150 prior to the May 1, 2002 deadline. That check was cashed by the Department of State and this firm did not receive any correction notice.

Respectfully submitted,

  
La-Tonya Brooks

801 North Magnolia Avenue, Suite 402  
Orlando, Florida 32803-3851  
Telephone: 407.648.1481  
Fax: 407.872.5755