

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000100170

FILED
Apr 03, 2002 8:00 AM
Secretary of State

Entity Name: SECURITY TITLE (CARIBBEAN), INC.

Current Principal Place of Business:

12230 FOREST HILL BLVD.
SUITE 100
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

12230 FOREST HILL BLVD.
SUITE 100
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 65-1151474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKER, LAVONNE L
15960 HILLER STREET
WELLINGTON, FL 33414

Name and Address of New Registered Agent:

KOHL, N. DEAN, JR. ESQ.
50 S.E. KINDRED STREET
SUITE 107
STUART, FL 34994

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: N. DEAN KOHL, JR.

04/03/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WICKER, LAVONNE L
Address: 12230 FOREST HILL BLVD., STE. 100
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAVONNE L. WICKER

PD

04/03/2002

Electronic Signature of Signing Officer or Director

Date