2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000013771

1. Entity Name

ROYAL FLORIDA ABSTRACT CO, INC.



4.

Principal Place of Business

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

220 SUNRISE AVENUE STE, 103 PALM BEACH, FL 33480

220 SUNRISE AVENUE STE. 103 PALM BEACH, FL 33480

FILED Jan 14, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01052004 No Chg-P CR2E034 (10/03)

4. FEI Number	Applied For
90-0008226	 Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

YOUNG, JEFFERY N 220 SUNRISE AVENUE STE. 103

SIGNATURE:

DO NOT WRITE

PALM BEA	M BEACH, FL 33480			IN THIS SPACE		
the obligation	named entity submits this statement for the pons of registered agent.	l. ourpose of changing its registere	d office or r	egistered agent, or bot	h, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable, (NOTE, Registered	Agent signatur	required when reinstaling)	DATE	
	E NOW!!! FEE IS \$150.00 by 1, 2004 Fee will be \$550.00	Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10,	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD YOUNG, JEFFERY N 220 SUNRISE AVENUE STE. 103 PALM BEACH, FL 33480				1150505054400	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BANCHS, VANESSA L 220 SUNRISE AVENUE STE. 103 PALM BEACH, FL 33480				0000000001166 _01715704-80001-016 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated of the corchanged,	certify that the information supplied with this is on this report or supplemental report is true production or the receiver of pressed empowere or on an attachment with an address with	iling does not qualify for the exer and accurate and that my signat d to execute this report as required to the rike empowered.	nption state ure shall ha ed by Char	ed in Section 119.07(3) ve the same legal effec- ter 607, Florida Statute	 Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director is, and that my name appears in Block 10 or Block 11 if 	