2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2003
Secretary of State

DOCUMENT# P02000072897

Entity Name: FEE SIMPLE TITLE AGENCY, INC.

Current Principal Place of Business:

2124 ILLINOIS AVENUE
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2124 ILLINOIS AVENUE
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 03-0471517 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOOD, KELLI D
1020 EL MAR AVENUE
FORT MYERS, FL 33919

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BIGLANE, MICHAEL S
Address: 4841 CORAL ROAD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: V ( ) Delete
Name: BIGLANE, MICHAEL S
Address: 4841 CORAL ROAD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: S ( ) Delete
Name: BIGLANE, MICHAEL S
Address: 4841 CORAL ROAD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: T ( ) Delete
Name: BIGLANE, MICHAEL S
Address: 4841 CORAL ROAD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BIGLANE, MICHAEL S
Address: 5567 SUNRISE DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: V (X) Change ( ) Addition
Name: BIGLANE, MICHAEL S
Address: 5567 SUNRISE DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: S (X) Change ( ) Addition
Name: BIGLANE, MICHAEL S
Address: 5567 SUNRISE DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: T (X) Change ( ) Addition
Name: BIGLANE, MICHAEL S
Address: 5567 SUNRISE DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Change (X) Addition
Name: BIGLANE, MICHAEL S
Address: 5567 SUNRISE DRIVE
City-St-Zip: FORT MYERS, FL 33919

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: MICHAEL S. BIGLANE P 04/08/2003

Electronic Signature of Signing Officer or Director — Date