

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2002 8:00 am
Secretary of State

02-15-2002 90019 045 ***158.75

406955



DO NOT WRITE IN THIS SPACE

DOCUMENT # P26446
1. Entity Name
SOUTHERN TITLE INSURANCE CORPORATION

Principal Place of Business
1051 E. CARY ST.
7TH FL.
RICHMOND VA 23219
US

Mailing Address
P. O. BOX 399
RICHMOND VA 23218
US

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

54-0483197

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

INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32301

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.

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, 2002 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 **DP** ☐ Delete
NAME **CRUICKSHANKS, DONALD V**
STREET ADDRESS **1051 E. CARY ST. 7TH FL.**
CITY-ST-ZIP **RICHMOND VA 23219**

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

TITLE **V** ☐ Delete
NAME **HARDWICK, WILLIAM J**
STREET ADDRESS **915 MAIN ST 3RD FLOOR**
CITY-ST-ZIP **LYNCHBURG VA 24504**

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

TITLE **VSD** ☐ Delete
NAME **SKLAR, GERALD W.**
STREET ADDRESS **1051 E. CARY ST. 7TH FL.**
CITY-ST-ZIP **RICHMOND VA 23219**

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

TITLE **V** ☐ Delete
NAME **BRIEL, MICHAEL E.**
STREET ADDRESS **305 HARRISON ST SE, SUITE 100**
CITY-ST-ZIP **LEESBURG VA 20175**

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

TITLE **V** ☐ Delete
NAME **WILEY, JR., RONALD D**
STREET ADDRESS **401 PARK ST**
CITY-ST-ZIP **CHARLOTTESVILLE VA 22901**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald V. Cruickshanks **1/29/02** **804-648-6000**

Date

Daytime Phone #

CR2E034 (9/01)

Attachments / 406955

2002 UNIFORM BUSINESS REPORT (UBR)
DOCUMENT #P23446
Southern Title Insurance Corp.

#12: Officers & Directors (continued)

CD

David E. Hosler
2929 Lititz Pike
Lancaster, PA 17604

VT

Ronald Clifton Britt
1051 E. Cary Street, 7th Floor
Richmond, VA 23219

DV

Dennis M. Reeves
One Park Circle
Westfield Ctr., OH 44251

V

Scott Alan Johnson
1051 E. Cary Street, 7th Floor
Richmond, VA 23219

V

Clyde Morton Weaver, Jr.
1051 E. Cary Street, 7th Floor
Richmond, VA 23219

V

Edward Ray Waugaman
200 Golden Oak Court, #155
VA Beach, VA 23452

D

Robert Joseph Joyce
One Park Circle
Westfield Ctr., OH 44251