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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

PORGOR

(5)

APPROVED AND FILED 96 KAR -6 AM 1:16

1. Corporation Name FIRST TITLE CORPORATION (TN)					SEGRETARY O WILLAMASSEE	GEGREYARY OF STATE 12 11 AHASSE, FLORIDA	
Principal Place	e of Business	Mailing Address				8) 1817 91811 81811 81811 81816 81811 81811 1681	
3761 VENTURE DR. SUITE 210 DULUTH GA 30136		P O BOX 956370 SUITE 210					
US		US US			3. Date Incorporated or Qualified 11/22/1989	3a. Date of Last Report 02/13/1995	
Principal Place of Business 2a. Mailing Addres			· · · · · · · · · · · · · · · · · · ·		4. FEI Number		
21	*·				58-1719995	Not Applicable	
Suite, Apt. #, etc. Suite, Apt 27			I. #, €tc.		5. Certificate of Status Desired	\$8.75 Additional	
					6. Election Campaign Financing	Fee Required	
23		28	, 		Trust Fund Contribution	S5.00 May Be Added to Fees	
Ζφ	├ ─┐ ' ├──┐		Country		8. This corporation has hability for		
24	25 9. Name and Address of Curr	29	[30]		Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	9, Name and Address of Con	ent negistered Agent	8	1 Name	10. Name and Address of New F	Registered Agent	
CT CO	RPORATION SYSTEM		,	1	(DO DE N		
	. PINE ISLAND ROAD		0	2 Street A	ddress (P.O. Box Number is Not Acceptar	ole)	
PLANT	ATION FL 33324		Ţ				
			8	4 City		85 Zip Code	
44 Durangat	to the previous of Castians 607.66	70 1 (2)7 1 (0) Fig. 11 (0) A		1		FI I'' I	
	red agent, or both, in the State of Fik ith, and accept the obligations of, So	orida Such change was author ortion 607.0505, Florida Statuti	ized by the co	rporation's b	poration submits this statement for the purporation of directors. Thereby accept the app	rpose of changing its registered office lointment as registered agent. I am	
SIGNATURE	Signature, typed or pricted name of registered ag	in ta diplomana zanie	v Ít. Registeren A _s	jent sgjiraluh, roj	parent when revised things		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
Tillef	PD			E		Change	
NAME STREET ATTOMAGE			12 NAME		3761 Venture Drive	/ \	
STEEF ADDRESS	171 44 774 . 64				Duloth, GA 30136		
CLTY - ST - ZIP TIPLE	TD		2 1 TOL		DUINTIGH SOISO	Change Addition	
NAME	MOORE, JEANENE S.		2 2 NAM			Addition	
STREET ACORESS	1				3761 Venture Drive		
C11+-S1-ZP	ATLANTA GA		2.4 Offy		Duluth GA 30136		
THEE	□ DELETE		3 1 1111	F .		Change Addition	
NAME		•	3.2 NAM	1			
STREET ACORESS				EL ADORESS	والمالة والمالة والمالة	001736209	
CITY - ST - ZIP TITLE		DELETE	3 4 OHY 4 1 TiTu			796-81899-865 ₆₆₀	
NAME		Decent	4.2 NAM		米米米米シ	796- 91839-0 05360 900.00 ****200.00	
STREET ADDRESS			- P	LI ADORESS			
C-11 - S1 - Z-P			4 4 CITY				
101	☐ DELETE		5 1 111,			Change Addition	
NAME			5.2 NAM	.	^		
STREET ADDRESS			. 53STAE	EL ADDRESS			
C 1Y - ST - 7/P	· · · · · · · · · · · · · · · · · · ·		5.4 CiTY				
T-TLE	DELETE		6 1 TITU		T VINO	Charige Addition	
NAME organi annocido			6.2 NAM		7.7/6.		
STREET ADDRESS CHTY-ST-ZIP				ET ACORESS			
14 I do berel	y cortify that the information enough	d with this files is unhestable for	64 CITY	-51-7P' [for the experience stated in Control 116	07:2/2 5:	

Too nereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida Statutes I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OF DIRECTOR

770-623-3138