

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000001083 (4)**

1. Corporation Name

RUSSO TITLE, INC.



Principal Place of Business

**6819 CIRCLE CREEK DRIVE
PINELLAS PARK FL 34665**

Mailing Address

**6819 CIRCLE CREEK DRIVE
PINELLAS PARK FL 34665**

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

30 Country

3. Date incorporated or Qualified

11/01/1992

3a. Date of Last Report

03/24/1995

4. FEI Number

59-3151281

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

**RUSSO, JOSEPH A
6819 CIRCLE CREEK DRIVE
PINELLAS PARK FL 34665**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
NAME **PSDT
RUSSO, JOSEPH A**
STREET ADDRESS **6819 CIRCLE CREEK DRIVE**
CITY - ST - ZIP **PINELLAS PARK FL 34665**

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS

14 CITY - ST - ZIP
21 TITLE Change Addition
22 NAME
23 STREET ADDRESS

24 CITY - ST - ZIP
31 TITLE Change Addition
32 NAME
33 STREET ADDRESS

34 CITY - ST - ZIP
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS

44 CITY - ST - ZIP
51 TITLE Change Addition
52 NAME
53 STREET ADDRESS

54 CITY - ST - ZIP
61 TITLE Change Addition
62 NAME
63 STREET ADDRESS

14. I do hereby 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), Florida 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 OFFICER OR DIRECTOR

Joseph A Russo

3/30/96

DATE

819-527-1692

PHONE NUMBER

CR2E034 (12/95)