

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000011616 (9)

1. Corporation Name

MONROE TITLE COMPANY



Principal Place of Business

22725 OLD STATE ROAD 4A
CUDJOE KEY FL 33043
US

Mailing Address

22725 STATE ROAD 4A
CUDJOE KEY FL 33043
US

3. Date Incorporated or Qualified
12/09/1992

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

21 27221 Overseas Highway

Suite, Apt. #, etc.

22

City & State

23 Ramrod Key, FL

Zip

24 33042

Country

25 US

2a. Mailing Address

26 27221 Overseas Highway

Suite, Apt. #, etc.

27

City & State

28 Ramrod Key, FL

Zip

29 33042

Country

30 US

4. FEI Number
65-0377028

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

10. Name and Address of New Registered Agent

JOHNSON, BRENDA S
22725 OLD STATE ROAD 4A
CUDJOE KEY FL 33042

81 Name

Brenda S. Johnson

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

27221 Overseas Highway

83

84 City

Ramrod Key

FL

85

Zip Code
33042

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

Brenda S. Johnson

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

(NOTE: Registered Agent signature required when reappointing)

DATE

4/30/96

12. OFFICERS AND DIRECTORS

TITLE P REIF, DIANA CURTIS ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
ROUTE 6, BOX 182
SUMMERLAND KEY FL 33042

TITLE ST ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
FINLEY, KAY G
ROUTE 2, BOX 551
SUMMERLAND FL 33042

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Brenda S. Johnson
17213 Starfish Lane
Sugarloaf Key, FL 33042

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Brenda S. Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 (305)872-2006

Date

Daytime Phone #

CR2E034 (12/95)