

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000020670 (4)

1. Corporation Name

EASTERN 100 TITLE CORPORATION

Principal Place of Business

1040 BAYVIEW DR.
SUITE 520
FT. LAUDERDALE FL 33304
US

Mailing Address

1040 BAYVIEW DR.
SUITE 520
FT. LAUDERDALE FL 33304
US

APPROVED
AND
FILED

95 MAY -1 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/16/1993
3a. Date of Last Report 07/05/1994

4. FEI Number 65-0416491
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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 Suite 420
City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 Suite 420
City & State

28 Zip

29 Country

10. Name and Address of New Registered Agent

81 Name

Heaton, Linn

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

1040 Bayview Dr., Suite 420

83

84 City

Ft. Lauderdale

FL

85 Zip Code

33304

HEATON, LINN
18701 SE FEDERAL HWY
JUPITER FL 33469

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 of Registered Agent or Agent in Charge)

(Signature of Registered Agent or Agent in Charge)

DATE

12. OFFICERS AND DIRECTORS

12.1 NAME
D HEATON, LINN
12.2 STREET ADDRESS
1040 BAYVIEW DR., STE. 520
12.3 CITY, ST, ZIP
FT. LAUDERDALE FL

12.4 NAME
12.5 STREET ADDRESS
12.6 CITY, ST, ZIP

12.7 NAME
12.8 STREET ADDRESS
12.9 CITY, ST, ZIP

12.10 NAME
12.11 STREET ADDRESS
12.12 CITY, ST, ZIP

12.13 NAME
12.14 STREET ADDRESS
12.15 CITY, ST, ZIP

12.16 NAME
12.17 STREET ADDRESS
12.18 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY, ST, ZIP

13.5 TITLE ☐ Change ☐ Addition
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY, ST, ZIP

13.9 TITLE ☐ Change ☐ Addition
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY, ST, ZIP

13.13 TITLE ☐ Change ☐ Addition
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY, ST, ZIP

13.17 TITLE ☐ Change ☐ Addition
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY, ST, ZIP

13.21 TITLE ☐ Change ☐ Addition
13.22 NAME
13.23 STREET ADDRESS
13.24 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)(b), 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 447, Florida Statutes, and that my name appears in Block 1, or Block 1, of changed, on an affidavit with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/95 (30) 563-3779