

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000062201

1. Entity Name

BREVARD TITLE, INC.

Principal Place of Business

2312 S BABCOCK ST
MELBOURNE FL 32901
US

Mailing Address

2312 S BABCOCK STREET
MELBOURNE FL 32901-5308
US

2. Principal Place of Business

1800 W. HIBISCUS BLVD, SUITE 110

3. Mailing Address

1800 W. HIBISCUS BLVD, SUITE 110

Suite, Apt. #, etc.

SUITE 110

Suite, Apt. #, etc.

SUITE 110

City & State

MELBOURNE, FLORIDA

City & State

MELBOURNE, FLORIDA

Zip

32901

Country

US

Zip

32901

Country

US

6. Name and Address of Current Registered Agent

SAMS, RENIE A.
428 ST. GEORGES CT
SATELLITE BEACH FL 32937

7. Name and Address of New Registered Agent

Name
SAMS, RENIE A.

Street Address (P.O. Box Number is Not Acceptable)
11330 S. TROPICAL TRAIL

City
MERRITT ISLAND

FL

Zip Code
32952

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

Renie A. Sams

RENIE A. SAMS

MARCH 24, 2000

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, 2000 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

TITLE PD ☐ Delete
NAME SAMS, RENIE A.
STREET ADDRESS 428 ST GEORGES CT
CITY-ST-ZIP SATELLITE BCH. FL

TITLE VPD ☐ Delete
NAME SAMS, JOHN G
STREET ADDRESS 428 ST GEORGES CT
CITY-ST-ZIP SATELLITE BCH FL

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME SAMS, RENIE A.
STREET ADDRESS 11330 S. TROPICAL TRAIL
CITY-ST-ZIP MERRITT ISLAND, FLORIDA 32952

TITLE VPD ☒ Change ☐ Addition
NAME SAMS, JOHN G.
STREET ADDRESS 11330 S. TROPICAL TRAIL
CITY-ST-ZIP MERRITT ISLAND, FLORIDA 32952

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

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

TITLE ☐ Change ☐ Addition
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:

John G. Sams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN G. SAMS

Date

March 24, 2000

Daytime Phone #

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90075 022 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)