

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**



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

DOCUMENT # P93000079478 (2)
 1. Corporation Name
B-D-R TITLE CORPORATION



Principal Place of Business Mailing Address

**33 B SUNTREE PALCE
 MELBOURNE FL 32940
 US**

**33 B SUNTREE PLACE
 MELBOURNE FL 32940
 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address

21 6767 N. Wickham Road **26 6767 N. Wickham Road**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

22 Suite 106 **27 Suite 106**
 City & State City & State

23 Melbourne, FL **28 Melbourne, FL**
 Zip Country Zip Country

24 32940 **25 USA** **29 32940** **30 USA**

3. Date Incorporated or Qualified
11/17/1993

4. FEI Number **59-3234794** 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 owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No

9. Name and Address of Current Registered Agent

**SPRAGINS, STEVE
 973 OSPREY DRIVE
 MELBOURNE FL 32940**

10. Name and Address of New Registered Agent

81 Name Buescher, Keith
82 Street Address (P.O. Box Number is Not Acceptable) 6767 N. Wickham Road, Suite 500
83
84 City Melbourne, FL 85 Zip Code 32940

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 *Keith Buescher* **KEITH BUESCHER** **4-29-98**
 Signature typed for printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPRAGINS, STEVE	1.2 NAME	
STREET ADDRESS	973 OSPREY DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEISS, PATRICIA A	2.2 NAME	P Leiss, Patricia A.
STREET ADDRESS	49 ECHO STREET	2.3 STREET ADDRESS	1849 Echo Ct.
CITY-ST-ZIP	DELTONA FL	2.4 CITY-ST-ZIP	Deltona, FL 32725
TITLE	S	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YELLAND, RONALD J	3.2 NAME	DS Yelland, Ronald J.
STREET ADDRESS	5320 CHESWICK CIRCLE	3.3 STREET ADDRESS	5320 Cheswick Circle
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	Orlando, FL
TITLE	TCO	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KUSH, ROBERT M	4.2 NAME	DT Kush, Robert M.
STREET ADDRESS	837 OAK PARK DR	4.3 STREET ADDRESS	837 Oak Park Drive
CITY-ST-ZIP	MELBOURNE FL	4.4 CITY-ST-ZIP	Melbourne, FL 32940
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	DV Buescher, Keith
STREET ADDRESS		5.3 STREET ADDRESS	812 Oak Park Drive
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Melbourne, FL 32940
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 *Robert M. Kush* **ROBERT M. KUSH** **4-29-98** **167 250 6000**

CR2E034 (10/97)