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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

97 SEP 11 PM 2:24

DOCUMENT # P94000040395 (3)

1. Corporation Name
AMERITITLE, INC.

SECRETARY OF STATE



Principal Place of Business

Mailing Address

1842
2430 SHADOWLAWN DR., SUITE 18
NAPLES FL 33962
US

2430 SHADOWLAWN DR., SUITE 18
NAPLES FL 33962
US

REINSTATEMENT 96-97

3. Date Incorporated or Qualified
05/25/1994

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0505953

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

2a. Mailing Address

21 1842 40TH TERR S.W.
Suite, Apt. #, etc.

26 1842 40TH TERR. S.W.
Suite, Apt. #, etc.

22 #5

27 #5

23 City & State

28 City & State

NAPLES FL

NAPLES, FL

24 Zip 34116

Country

25 COLLIER

29 Zip 34116

Country

30 COLLIER

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOLLANDER, RICHARD J ESQ.
2430 SHADOWLAWN DR., SUITE 18
NAPLES FL 33962

81 Name TERRY A. LURIE

82 Street Address (P.O. Box Number is Not Acceptable)
1842 40TH TERRACE SW

83 #5

84 City NAPLES

FL

85 Zip Code 34116

11. Pursuant to the provisions of Sections 607.5502 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 607.0105, Florida Statutes.

SIGNATURE

(Signature, type or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

1.5 TITLE

1.6 NAME

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