

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

FILED
Jun 23 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 # 994000085142

1. Corporation Name
University Title Services, Inc.
1023 Manatee Avenue, West
Bradenton, FL 34205

Principal Place of Business
1023 Manatee Avenue West
Bradenton, FL 34205

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/22/94

4. FEI Number
65-0537845

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

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 00

2a. Mailing Address

26 6630 W. Broad St.
Suite, Apt. #, etc

27 City & State

28 Richmond, VA
Zip Country

29 23230 30 USA

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

Caleb J. Grimes
1023 Manatee Avenue, West
Bradenton, FL 34205

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 (typed or printed name of registered agent or officer if not applicable)

(NOTE: Registered Agent signature required when reinstating)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	President/Director
NAME	J. Scott McCall
STREET ADDRESS	100 N. Tampa St.
CITY-ST-ZIP	Tampa, FL 33602
TITLE	Vice President
NAME	C. Samuel Whitehead
STREET ADDRESS	P. O. Box 5276
CITY-ST-ZIP	Englewood, FL
TITLE	Secretary/Director
NAME	Leslie H. Gladfelter
STREET ADDRESS	1023 Manatee Ave West
CITY-ST-ZIP	Bradenton, FL 34205
TITLE	Treasurer/Director
NAME	Roger F. Postlethwaite
STREET ADDRESS	7550 Lorraine Rd.
CITY-ST-ZIP	Bradenton, FL
TITLE	Assistant Secretary
NAME	Brenda K. McGill
STREET ADDRESS	6630 W. Broad St.
CITY-ST-ZIP	Richmond, VA 23230

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	2199 Ringling Boulevard
2.4 CITY-ST-ZIP	Sarasota, FL 34237-7003
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 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 of this report or on an attachment with an address.

CR2E034 (10/97)