

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000025262

1. Entity Name

MARTIN JOINT TITLE PLANT, INC.



Principal Place of Business

3900 WOODLAKE BLVD
STE 312
GREENACRES, FL 33463 US

Mailing Address

3900 WOODLAKE BLVD
#312
GREENACRES, FL 33463 US



03092004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0575545

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KNEEN, JEFFREY D
1400 CENTREPARK BLVD., SUITE 1000
WEST PALM BEACH, FL 33401

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000104955
04/07/04-80006-006 150.00

10. OFFICERS AND DIRECTORS

TITLE	DV
NAME	NAIL, SHAYLA
STREET ADDRESS	729 S FED HWY 103
CITY - ST - ZIP	STUART, FL
TITLE	D
NAME	HICKMAN, HAROLD
STREET ADDRESS	3401 CYPRESS ST., # 203
CITY - ST - ZIP	TAMPA, FL 33607
TITLE	DP
NAME	SZEGLOWSKI, CHET
STREET ADDRESS	1635 TAMPA ST
CITY - ST - ZIP	TAMPA, FL
TITLE	T
NAME	MARTEL, ALBERT E
STREET ADDRESS	3402 W CYPRESS ST SUITE 300
CITY - ST - ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Albert E. Martel, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR EMPLOYEE

3/9/04 813-354-7777

Date Daytime Phone #