

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000073126

1. Corporation Name

SUNSHINE STATE ABSTRACT & TITLE INC.

Principal Place of Business

Mailing Address

5606 US 27 NORTH  
SEBRING, FLORIDA 33870

2. Principal Place of Business

2a. Mailing Address

21 same as above

26 same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Sebring, FL

28 Sebring, FL

Zip Country

Zip Country

24 33870

25

29 33870

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
September 19, 1995

3a. Date of Last Report

4. FEI Number

59-3334348

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

10. Name and Address of New Registered Agent

81 Name

Michael M. Disler

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

329 S. Commerce Avenue

83

84 City

Sebring,

FL

85 Zip Code  
33870

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

MICHAEL M. DISLER

Signature, typed or printed name of registered agent and 1% if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/19/96  
DATE

12. OFFICERS AND DIRECTORS

TITLE President  
NAME Fred J. Sandlin  
STREET ADDRESS 5606 US 27 North  
CITY-ST-ZIP Sebring, FL 33870

DELETE

TITLE Secretary/Treasurer  
NAME Robert A. Gaines  
STREET ADDRESS 5606 US 27 North  
CITY-ST-ZIP Sebring, FL 33870

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/Director

Change Addition

1.2 NAME Patricia W. Johnson

1.3 STREET ADDRESS 5606 US 27 North

1.4 CITY-ST-ZIP Sebring, FL 33870

2.1 TITLE Secretary/Director

Change Addition

2.2 NAME Michael M. Disler

2.3 STREET ADDRESS 329 S. Commerce Avenue

2.4 CITY-ST-ZIP Sebring, FL 33870

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Patricia W. Johnson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96  
Date

(941) 382-9797  
Daytime Phone #

CR2E034 (12/95)