19.1al7 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9600016034 1. Entity, Name* FIRST FLORIDA GROUP, INC. nn aug 25 AM 9: 40 Principal Place of Business Mailing Address SECRETARY OF STATE TALLAHASSEE, FLORIDA 6300 TRAIL BLVD 6300 TRAIL BLVD PEACOCK CT BLDG PEACOCK CT BLDG NAPLES FL 33963 NAPLES FL 33963 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0743800 Not Applicable Zip Country Zío Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent LEEBER, ROBERT B Street Address (P.O. Box Number is Not Acceptable) 6300 TRAIL BLVD PEACOCK CT BLDG NAPLES FL 33963 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 8 DΡ TITLE Delete TITLE Addition LEEBER, ROBERT B NAME MARKE E034 (STREET ADDRESS 1036 S COLLIER BLVD STREET ADDRESS CITY-ST-ZIP MARCO ISLAND FL 33937 CITY-ST-ZIP TITLE **VPST** Delete TITLE Change Addition WOOD, ROBERT NAME NAME STREET ADDRESS 3413 EASTERN AVE. S.E. STREET ADDRESS CITY-ST-ZIP **GRAND RAPIDS MI 49508** CITY-ST-ZIP Change Change Addition TITLE: eroloG 🔲 TITE F NAME NAVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-7IP Addition TITLE ☐ Change TITLE Delete NAME NAUF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete 717) F TIDE NAME NAME STREET ADORESS STREET ADDRESS CITY - ST - ZiP CITY ST ZIE Addition TITLE ☐ Delete HILE NAME STREET ADDRESS STREET ADDRESS 90074001 15 D.OE CITY-ST-ZIP

13. Thereby certify that the information supplied with this filing does not qualify for the examplion 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 cath: that I am an officer or director of the corporation or the receiver or trustee employered is execute this sport as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other members.

Robert B. Leeber, President 8/3/00 941/597-157

SIGNATURE: Robert B. Leeber, President 8/3/00 941/597-1577

Py. Zeel?



ISLAND TITLE'S 5 STAR SERVICE 19348

August 3, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

#P9600016034 19349

RE: ISLAND TITLE GUARANTY AGENCY, INC. AND FIRST FLORIDA GROUP, INC.

To Whom It May Concern:

This letter will advise you that we filed our annual corporate reports on April 3, 2000, but you show no record of them. Therefore, we are re-submitting them with the regular fee of \$150.00 for each report.

We will call late next week to make sure they have been received. Thank you for your assistance.

Sincerely

Robert B. Leeber

President

RBL/mm Enclosures CC: file

ISLAND TITLE GUARANTY AGENCY INC.