

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000067412

FILED  
Mar 14, 2002 8:00 AM  
Secretary of State

Entity Name: ALLIANCE TITLE OF AMERICA, INC.

## Current Principal Place of Business:

2502 ROCKY POINT DR  
SUITE 180  
TAMPA, FL 33607 US

## New Principal Place of Business:

3030 N. ROCKY POINT DRIVE WEST  
SUITE 400  
TAMPA, FL 33607 US

## Current Mailing Address:

2502 ROCKY POINT DR  
SUITE 180  
TAMPA, FL 33607 US

## New Mailing Address:

3030 N. ROCKY POINT DRIVE WEST  
SUITE 400  
TAMPA, FL 33607 US

FEI Number: 65-0685696

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INSURANCE COMMISSIONER  
THE CAPITOL  
TALLAHASSEE, FL US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DOT ( ) Delete  
Name: CAREVICH, GARY  
Address: 2987 WILDERNESS BOULEVARD, EAST  
City-St-Zip: PARRISH, FL 34219

Title: DOS ( ) Delete  
Name: HENDRICKSON, ROBERT W III  
Address: 5907 FLOTILLA DRIVE  
City-St-Zip: HOLMES BEACH, FL 34217

Title: DOV ( ) Delete  
Name: THOMAS, KEVIN D  
Address: 536 LAKE COMO CIR  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: CAREVICH, GARY  
Address: 2987 WILDERNESS BLVD. EAST  
City-St-Zip: PARRISH, FL 34219

Title: D ( ) Delete  
Name: STEVENSON, DONNA  
Address: 4965 CASTAYLES ROAD  
City-St-Zip: PENSACOLA, FL 32504

Title: DOP ( ) Delete  
Name: FLAVIN, BARRY  
Address: 1473 RIVERDALE DRIVE  
City-St-Zip: OLDSMAR, FL 34677

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY FLAVIN

DOP

03/14/2002

Electronic Signature of Signing Officer or Director

Date

CHARLES GUY BATSEL  
16150 SUNSET PINES CIRCLE  
BOCA GRANDE, FL 33921

GILBERT MONSON, D  
3402 WILDERNESS BLVD WEST  
PARRISH, FL 34219

THOMAS STENSON, D  
5195 NW 80TH AVENUE NORTH  
OCALA, FL 34482

HAROLD HICKMAN, D  
1614 ALTOONA WAY  
BRANDON, FL 33646

MICHAEL GLASS, D  
18190 SE ISLAND DRIVE  
TEQUESTA, FL 33469

SCOT MOORE, T  
3030 N. ROCKY POINT DRIVE  
SUITE 400  
TAMPA, FL 33707

HAROLD HICKMAN, D

MICHAEL GLASS, D  
18190 SE ISLAND DRIVE  
TEQUESTA, FL 33469

SCOT MOORE, T  
3030 N. ROCKY POINT DRIVE  
SUITE 400  
TAMPA, FL 33707