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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000075146 (6)

BUILDER'S TITLE SERVICES, INC.

Principal Place of Busines	s
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Mailing Address

8401 JR MANOR DRIVE #200 TAMPA FL 33634 8401 JR MANOR DRIVE #200 TAMPA FL 33634-1400

FILED Apr 28 1997 8:00am Secretary of State

3a. Date of Last Report

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3. Date Incorporated or Qualified

09/10/1996

(Vallageran) 11 MICHANIAN Aboles 212/21/2 aver

2. Principal Place of Business		2a. Mailing Addre	ss			4. FEI Number 2.12 0 1		Applied For			
21		26	26			59-342 345	4		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional				
27									Feel	Required	
City & State City & State						6. Election Campaign Financing	·		O May Be		
23 28						Trust Fund Contribution			d to Fees		
Zip		Country	Zip	├ ─┐	untry	This corporation has intomity for intalligible tax direct 5. 150.002,					
24	0 11	25	29	30	Florida Statutes Yes No 10. Name and Address of New Registered Agent						
1461			ent Registered Agent		81	Name	10. Name and Address of New Re	gistereu A	gent		
MCMICHAEL, WALTON H					["]	TVAI TIO					
8401 JR MANOR DRIVE #200					82 Street Address (P.O. Box Number is Not Acceptable)						
IAMI	PA FL 336:	54			B3						
					"						
					84	City		- 1	85 Zij	p Code	
		10			ــــــــــــــــــــــــــــــــــــــ			FL_			
11. Pursuant office or re	to the provis epistered ac	ions of Sections 607.03 iont, or both, in the Sta	502 and 607.1508, Florida te of Florida. Such chang	a Statutes, the a re was authorize	ed by	e-named corp The corporat	oration submits this statement for the plion's board of directors. I hereby accept	ourpose of of the appo	changing sintment a	its registered. as registered	
age nt. I a	m tamiliar w	th, and accept the obl	igations of, Section 607.0	i505, Florida Sta	tutes	i. '	,			, i	
SIGNATURE											
12.	Signature typed	or printed name of registered a	igent and title if applicable ND DIRECTORS	(NOT) : Registere		nt signalure requir	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DEDO AND	DIRECTO	7DC (N. 12	
TITLE	D	OFFICENS /	DEL				ADDITIONS/CHANGES TO OFFICE	JENS AND	Change		
NAME		NEL, WALTON H			IAME	ĺ	7		L_I Ollange	. Carrier	
,		MANOR DRIVE #20	١			1000000					
STREET ADDRESS	TAMPA F		,			ADDRESS					
CITY-ST-ZIP TITLE	IOMICAL	L 00007	□ DEL		ITLE	1-711			Chango	Addition	
NAME				221					onlinge	, Labrasia	
STREET ADDRESS	}					ADDRESS				· ·	
CITY-ST-ZIP					CITY-S						
TITLE			□ DEL			51-714			Change	e Addition	
NAME			٠	3.2 M						, , , , , , , , , , , , , , , , , , , ,	
STREET ADDRESS				1		ADDRESS					
					CITY-S						
CITY-ST-ZIP TITLE			DEL			21. 711.			Change	e 🔲 Addition	
NAME					NAME						
STREET ADDRESS	1					ADDRESS					
CITY-ST-ZIP					DITY-S	1					
TITLE			□ DEL			1-211			☐ Change	e Addition	
NAME				• • • • • • • • • • • • • • • • • • • •	IAME						
STREET ADDRESS						ADDRESS				İ	
CITY-ST-ZIP					SINEE I SITY-S						
TITLE			DEL			0 · 217			Change	e Addition	
NAME					IAME						
STREET ADDRESS						ADDRESS					
	,	1 ,	^ /	`							
CITY-ST-ZIP	l by certify the	the into viation summ	ied with this filing doos n		HTY-S		in Section 119.07(3)(i), Florida Statute	es i further	certify th	at the	
informatic	on indicated.	on this abrual report o	r s∕ub ollome'ntal annuall re	poff is true and	accu	irate and that	my signature shall have the same legal t as required by Chapter 607. Florida S	al effect as	if made i	under oath: that	