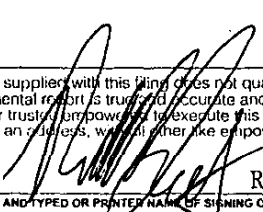


FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90164 003 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000076948	
1. Entity Name SOUTHEASTERN TITLE SERVICES, INC. ✓	
Principal Place of Business 200 S. Biscayne Blvd. Suite 2100 Miami, FL 33131	Mailing Address 200 S. Biscayne Blvd. Suite 2100 Miami, FL 33131
2. Principal Place of Business 201 Alhambra Circle Suite, Apt. #, etc. Suite 601 City & State Coral Gables, FL Zip 33134 Country USA	3. Mailing Address 201 Alhambra Circle Suite, Apt. #, etc. Suite 601 City & State Coral Gables, FL Zip 33134 Country USA
4. FEI Number 650700900 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent David Shear 200 S. Biscayne Blvd. Suite 2100 Miami, FL 33131	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 201 Alhambra Circle Suite 601 City Coral Gables FL Zip Code 33134	
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) DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS	
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP VSD Ronald R. Fieldstone 200 S. Biscayne Blvd., Suite 2100 Miami, FL 33131	TITLE NAME STREET ADDRESS CITY-ST-ZIP VSD Ronald R. Fieldstone 201 Alhambra Circle, Suite 601 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP VTD Paul Lester 200 S. Biscayne Blvd., Suite 2100 Miami, FL 33131	TITLE NAME STREET ADDRESS CITY-ST-ZIP VTD Paul Lester 201 Alhambra Circle, Suite 601 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD David Shear 200 S. Biscayne Blvd., Suite 2100 Miami, FL 33131	TITLE NAME STREET ADDRESS CITY-ST-ZIP PD David Shear 201 Alhambra Circle, Suite 601 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP VSD Michael Denberg 200 S. Biscayne Blvd., Suite 2100 Miami, FL 33131	TITLE NAME STREET ADDRESS CITY-ST-ZIP VSD Michael Denberg 201 Alhambra Circle, Suite 601 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an affidavit, without other like empowered.	
SIGNATURE:  Ronald R. Fieldstone 4/ 11/01 305-357-1001 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	

A0051198

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)