

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000106022

1. Entity Name

CREST TITLE COMPANY

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90076 012 ***150.00

Principal Place of Business

Mailing Address

9585 OVERSEAS HIGHWAY
MARATHON FL 33050

9585 OVERSEAS HIGHWAY
MARATHON FL 33050-3332

0 2 1 5 0 0



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0800715

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RITCH, KATHLEEN A.
9585 OVERSEAS HIGHWAY
MARATHON FL 33050

Name

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

9585 OVERSEAS Highway

City

MARATHON, FL.

FL

Zip Code

33050

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

April Motley
Signature, typed or printed name of registered agent and title if applicable.

APRIL MOTLEY

2-18-2000

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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 PD
NAME SEIBER, DON D
STREET ADDRESS 9585 OVERSEAS HIGHWAY
CITY-ST-ZIP MARATHON FL 33050 ☒ Delete

TITLE PD
NAME CAMPBELL, DANIEL E.
STREET ADDRESS 9585 OVERSEAS Highway
CITY-ST-ZIP MARATHON FL 33050 ☒ Change ☐ Addition

TITLE V
NAME VARNEY, DONNA
STREET ADDRESS 9585 OVERSEAS HIGHWAY
CITY-ST-ZIP MARATHON FL 33050 ☒ Delete

TITLE V.P.
NAME Paula R. Nardone
STREET ADDRESS 9585 Overseas Highway
CITY-ST-ZIP Marathon, FL 33050 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 address, with all other like empowered.

SIGNATURE:

Daniel E. Campbell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-18-2000

289-7291

Date

Daytime Phone #

CR2E034 (9/99)