

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

00 AUG 16 PM 3:45

DOCUMENT # P98000016456

1. Corporation Name
CITIZEN'S TITLE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
210 UNIVERSITY DRIVE
SUITE 208
CORAL SPRINGS FL 33071

Mailing Address
210 UNIVERSITY DRIVE
SUITE 208
CORAL SPRINGS FL 33071

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/19/1998

4. FEI Number

65-0820175

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132

81 Name
DeBORAH USINA

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

83 210 UNIVERSITY Drive # 208

84 City
CORAL SPRINGS FL 85 Zip Code
33071

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
DeBORAH USINA

X Deborah Harris
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

08/14/2000
Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
D
NAME
USINA, DEBORAH
STREET ADDRESS
210 UNIVERSITY DRIVE, SUITE 208
CITY-ST-ZIP
CORAL SPRINGS FL 33071

1.1 TITLE
VICE President
1.2 NAME
USINA, Deborah
1.3 STREET ADDRESS
210 UNIVERSITY Drive
1.4 CITY-ST-ZIP
CORAL SPRINGS FL 33071 # 208

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
President
2.2 NAME
Joseph L. Kohn
2.3 STREET ADDRESS
210 UNIVERSITY Drive # 208
2.4 CITY-ST-ZIP
CORAL SPRINGS FL 33071

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Deborah Harris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/14/2000 954-757-9330

Date

Daytime Phone #

016904

CR2E034 (11/98)