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

DOCUMENT # P98000039245

ST. JOE TITLE SERVICES, INC.

31. JOE THEE OCHANGES, INC	J.
Principal Place of Business	Mailing Address
1650 PRUDENTIAL DRIVE #400	1650 PRUDENTIAL DRIVE #400

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90081 011 ***150.00



JACKSONVILLE		JACKSONVILLE FL 32207			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					04/29/1998	Analis d Co-	
2. Principal Pl	al Place of Business 2a. Mailing Address				4, FEI Number	Applied For	
21					59-3508965	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			l = Outlibrate of Pinkus Desired 1	3.75 Additional Fee Required	
· City & State				6. Election Campaign Financing	5.00 May Be		
23		28				Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Intangib	le .	
—		29 30	- ·		Personal Property Tax.		
24]	25 29 30 9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
	9. Name and Address of Current	Registered Agent	81	Name	10.		
RHO	DES, ROBERT M						
			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
	PRUDENTIAL DRIVE #400		ļ <u>.</u>				
JACK	(SONVILLE FL 32207		83	'			
			84	City	85	Zip Code	
				1	FL		
office or re agent. I as	egistered agent, or both, in the State o m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statute:	the corpor s.	orporation submits this statement for the purpose of chan- ration's board of directors. I hereby accept the appointmen	it as registered	
	Signature, typed or printed name of registered agent			nt signature req	unce with to model ag	DECTORS IN 12	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DI	Change Al Addition	
TITLE	D	DELETE	1.1 TITLE		D/CEO -	Mange 25 Addition	
NAME	RUMMELL, PETER S		1.2 NAME		Richard W. Cope		
STREET ADDRESS	1650 PRUDENTIAL DRIVE #400		1.3 STREE	TADDRESS	19353 U.S. Highway 19 N.	, Ste 100	
CITY-ST-ZIP	JACKSONVILLE FL 32207		1.4 CITY-5	ST-ZIP	Clearwater, FL 34624		
TITLE	D	▼ DELETE	2.1 TITLE		$\Box D/\overline{VP}$	Change 🔀 Addition	
NAME	LEDSINGER, CHARLES A JR.	•	2.2 NAME		Michael N. Regan		
STREET ADDRESS	1650 PRUDENTIAL DRIVE #400		2.3 STREE	T ADDRESS	1650 Prudential Dr., Ste	. 400	
-			2. 4 CITY-		Jacksonville, FL 32207		
CITY-ST-ZIP	JACKSONVILLE_FL_32207	DELETE	3.1 TITLE	VI-ZIF		Change Addition	
TITLE	-	/	3.2 NAME		James D. Motta		
NAME	RHODES, ROBERT M	•	ſ	- 1	7900 Glades Road		
STREET ADDRESS	1650 PRUDENTIAL DRIVE #400			TADDRESS	Boca Raton, FL 33434		
CITY-ST-ZIP	JACKSONVILLE FL 32207	☐ DELETE	3.4. C/TY-	ST-ZIP		Change 🔀 Addition	
TITL€	,	☐ DELETE	4.1 TITLE		r/1	Mindon Mindon	
NAME			4, 2 NAME		Lewis A. Sticco	a	
STREET ADDRESS				T ADDRESS	19353 U.S. Highway 19 N.	, Ste. 10	
CITY-ST-ZIP		rm +=	4.4 CITY-	ST-ZIP	Clearwater, FL 34624	Change Addition	
TITLE		DELETE	5.1 TITLE		Ľ¹	Jiange Addition	
NAME			5.2 NAME	- 1			
STREET ADDRESS		,		ET ADDRESS			
CłTY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	
NAME			62 NAME	ļ		,	
STREET ADDRESS			6.3 STREE	ET ADDRESS			
CITY-ST-7IP			6.4 CITY-	ST-ZIP			
V417-31-7P			_				

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.