2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000059489

FILED Jan 03, 2003 Secretary of State

Entity Name: SOUTH FLORIDA TITLE INSURERS OF BROWARD COUNTY, INC.

Current Pri	incipal Place	of Rucinass	New Princ	ipal Place of Business:	
350 EAST L SUITE 1440	.AS OLAS BLV	/D.	Trew Time	ipai i lace di Basilless.	
Current Ma	ailing Address	s:	New Mailing Address:		
SUITE 1440	.AS OLAS BLV) RDALE, FL 33				
FEI Number:	65-0859112	FEI Number Applied For () FEI Nur	nber Not Appli	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
		/D., SUITE 1440 3301 US	OSTROW, JEFFREY M 350 EAST LAS OLAS BLVD. SUITE 1440 FT. LAUDERDALE, FL 33301 US		
The above in the State		ubmits this statement for the purpose o	of changing it	ts registered office or registered agent, or both,	
SIGNATUR	E: JEFFREY	M. OSTROW		01/03/2003	
	Electroni	c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title:	GELCH, GARY I 8751 W BROWA PLANTATION, FI	ARD BLVD, SUITE 408	Title: Name: Address: City-St-Zip: Title:	D (X) Change () Addition GELCH, GARY D 8751 W BROWARD BLVD, SUITE 408 PLANTATION, FL 33328 D (X) Change () Addition	
Name: Address: City-St-Zip:	TAYLOR, GREG	ORY B ARD BLVD, SUITE 408	Name: Address: City-St-Zip:	TAYLOR, GREGORY B 8751 W BROWARD BLVD, SUITE 408 PLANTATION, FL 33324	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition OSTROW, JEFFREY M 350 E. LAS OLAS BLVD., STE. 1440 FORT LAUDERDALE, FL 33301	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition HODKIN, ADAM J 350 E. LAS OLAS BLVD., STE. 1440 FORT LAUDERDALE, FL 33301	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition KOPELOWITZ, BRIAN R 350 E. LAS OLAS BLVD., STE. 1440 FORT LAUDERDALE, FL 33301	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition GIULIANTI, STACEY A 350 E. LAS OLAS BLVD., STE. 1440 FORT LAUDERDALE, FL 33301	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

	Flacture is Oissue town of Oissuing Office and Discotors		D-4-
SIGNATURE:	JEFFREY M. OSTROW	D	01/03/2003