## 2002 UNIFORM BUSINESS REPORT (UBR) P99000025366 **DOCUMENT #** 1. Entity Name REALTY TITLE INSURANCE CORP

## FILED May 09, 2002 8:00 am Secretary of State 05-09-2002 90080 033 \*\*\*158.75

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CI					i	03 03 2002 30000	055 15	0.75	
Suite, Apr. 8, otc.  City & State  City & FL Zip Code  See Registered Agent  City & FL Zip Code  Cit	1045 JENKS	AVENUE	1045 JENKS AVENUE						
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City & State  Country	2. Principal	Place of Business	3. Mailing Address		1				
City & State    Zip	Suite, Apt	:. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THI	IS SPACE		
Zip Country 7, December 20, Sentificate of Status Deared 8 \$3.75 Acadional Footpational Footpati	City & Sta	ate.	City & State			4 ESINumber			
S. Cardificate of Status Departed S. Name and Address of Current Registered Agant  7. Name and Address of New Registered Agent  Name    Name		-···	Only & State		4.	59-3566151	<b>—</b>		
GROSS, F. J. 1045 JENKS AVENUE PANAMA CITY FL 32401  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.  4. SENATURE  105 JENES AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ANDRE, R M  3254 COUNTRY CLUB DR  17. TITLE  17. ANDRE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  18. THE ADDRESS  19. THE ADDR	·	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Ac	ditional	
Street Address (P.O. Box Number is Not Acceptable)    City   FL   Zip Code		6. Name and Address of Current Re	egistered Agent		7.				
1045 JENKS AVENUE PANAMA CITY FL 32401  6. 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.  5. Signature growth from the purpose of changing its registered office or registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered office or registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered office or registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered office or registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered office or registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered office or registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  5. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  6. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  6. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  6. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  6. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  6. Signature growth from the purpose of changing its registered agent, or both, in the State of Florida.  6. Signature growth from the				Name	Name				
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SÍGNATURE  9. This corporation is eligible to satisfy its intangible  1. Tax filling requirement and elects to do so.    Make Check Payable to Department of State	:	e named entity submits this statement for the	ne purpose of changing its re	egistered office or regist	ered ac		<u> </u>		
9. This corporation is eligible to satisfy its Intanglible Case criteria on back) Secretical on back Secreti	, <b>(</b> ,	,	re perpede or ununging no re		orea ag	gent, or both, as the dials of Florida.			
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	13.   hereby o	certify that the information supplied with this	s filing does not qualify for th	o everentian stated in C	ection 1	119.07(3)(i), Florida Statutes. I further or	ertify that the i	nformation	

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:

04/25/02

850-872-7474