

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90042 039 ***150.00

DOCUMENT # P99000045710

1. Entity Name

HUNTINGTON TITLE SERVICES, INC.

Principal Place of Business

**240 S. PINEAPPLE AVENUE
 THIRD FLOOR
 SARASOTA FL 34236**

Mailing Address

**240 S. PINEAPPLE AVENUE
 THIRD FLOOR
 SARASOTA FL 34236**

2. Principal Place of Business

201 West Canton Avenue

3. Mailing Address

201 West Canton Avenue

Suite, Apt. #, etc.
Suite 150

Suite, Apt. #, etc.
Suite 150

City & State
Winter Park, Florida

City & State
Winter Park, Florida

4. FEI Number

59-3591244

Applied For

Not Applicable

Zip
32789

Country
USA

Zip
32789

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**AKIN, KATHALEEN F
 240 S. PINEAPPLE AVENUE
 THIRD FLOOR
 SARASOTA FL 34236**

7. Name and Address of New Registered Agent

Name
Rhonda James

Street Address (P.O. Box Number is Not Acceptable)
201 West Canton Avenue

Suite 150

City
Winter Park

FL

Zip Code
32789

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/12/02

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, 2002 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

TITLE
P ☐ Delete
 NAME
MOORE, MICHAEL
 STREET ADDRESS
7575 HUNTINGTON PARK DRIVE
 CITY-ST-ZIP
COLUMBUS OH 43235

TITLE
VP ☐ Delete
 NAME
BRADLEY, BRUCE
 STREET ADDRESS
2733 CLARK DRIVE
 CITY-ST-ZIP
GROVE CITY OH 43123

TITLE
T ☐ Delete
 NAME
HARMON, THOMAS J
 STREET ADDRESS
3588 RIVERVALE DRIVE
 CITY-ST-ZIP
COLUMBUS OH 43221-5626

TITLE
S ☐ Delete
 NAME
MORTON, DANIEL W
 STREET ADDRESS
83 ARDEN ROAD
 CITY-ST-ZIP
COLUMBUS OH 43214

TITLE
AS ☐ Delete
 NAME
LIEBERSBACH, JOHN W
 STREET ADDRESS
159 MISTY OAK PLACE
 CITY-ST-ZIP
COLUMBUS OH 43230

TITLE
D ☐ Delete
 NAME
LAKE, RODNEY H
 STREET ADDRESS
7230 DONNYBROOK DRIVE
 CITY-ST-ZIP
DUBLIN OH 43017

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

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

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

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

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 information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/11/02

CR2E034 (9/01)