

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

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90250 028 ***150.00

DOCUMENT # V06169

1. Corporation Name
GLOBAL TITLE COMPANY, A FLORIDA CORPORATION

Principal Place of Business Mailing Address
4760 TAMiami TR N. Suite #4
NAPLES FL 34103
US Naples, Florida 34109 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 2154 Trade Center Way 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 #4 27
City & State City & State
23 Naples, Florida 28
Zip Country Zip Country
24 34109 25 29 30

3. Date Incorporated or Qualified
01/13/1992
4. FEI Number Applied For
65-0352527 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
DARGAI, LANA KAYE
4760 NORTH TAMiami TRAIL
SUITE 22
NAPLES FL 33940

10. Name and Address of New Registered Agent
81 Name Lana Kaye Dargai
82 Street Address (P.O. Box Number is Not Acceptable)
2154 Trade Center Way Suite #4
84 City Naples, Florida FL 85 Zip 34109

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

12. OFFICERS AND DIRECTORS
TITLE PD ☐ DELETE
NAME GALT, ALBERT J.
STREET ADDRESS 4760 N. TAMiami TR #22
CITY-ST-ZIP NAPLES FL 34103
TITLE VPD ☐ DELETE
NAME DARGAI, LANA KAYE
STREET ADDRESS 4760 N TAMiami TR #22
CITY-ST-ZIP NAPLES FL 34103
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME 2154 Trade Center Way
1.3 STREET ADDRESS Suite #4
1.4 CITY-ST-ZIP Naples, Florida 34109
2.1 TITLE Vice President ☒ Change ☐ Addition
2.2 NAME 2154 Trade Center Way
2.3 STREET ADDRESS Suite #4
2.4 CITY-ST-ZIP Naples, Florida 34109
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
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: Lana Kaye Dargai, Vice President 3/15/99 941-596-1330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)