

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90327 045 ***150.00

MAY 2002

DOCUMENT # V35000
 1. Entity Name
FUENTES AND KREISCHER TITLE COMPANY

Principal Place of Business 1407 W BUSCH BLVD TAMPA FL 33612	Mailing Address 1407 W BUSCH BLVD TAMPA FL 33612
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-3137263	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FUENTES, LAWRENCE E 1407 W BUSCH BLVD TAMPA FL 33612 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST KREISCHER, ALBERT C JR 1407 W BUSCH BLVD TAMPA FL 33612 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BACCUS, BRIAN L 1407 W BUSCH BLVD TAMPA FL 33612 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WEISSMAN, ALAN S 1407 W BUSCH BLVD TAMPA FL 33612 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REINHARDT, JOE A 1407 W BUSCH BLVD TAMPA FL 33612 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FARENGA, PATRICK 1407 W BUSCH BLVD TAMPA FL 33612 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

ATTACHED

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 empowerments.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E034 (9/01)

Attachment

V 35000

FUENTES & KREISCHER TITLE CO.
FEIN - 59-3137263

OFFICERS AND DIRECTORS

DVP

Ronald R. Maudsley
4050 Calle Real
Santa Barbara, CA 93110

VPAS

Donald E. Partington
17911 Von Karman Avenue
Irvine, CA 92614

D

Erika Meinhardt
5775-C Peachtree Dunwoody Rd
Suite 200
Atlanta, GA 30342

VPCFO

Alan L. Stinson
4050 Calle Real
Santa Barbara, CA 93110

VPAS

Hilary B. Burkemper
4050 Calle Real
Santa Barbara, CA 93110

VPAS

Eileen W. Van Roeyen
171 N. Clark Street
Chicago, IL 60601

VPC

Francis Chan
4050 Calle Real
Santa Barbara, CA 93110

VPS

Fernando Velez, Jr.
4050 Calle Real
Santa Barbara, CA 93110

VPAS

Kevin R. Chiarello
17911 Von Karman Avenue
Irvine, CA 92614

VPTO

Richard L. Cox
4050 Calle Real
Santa Barbara, CA 93110

VPAS

Marjorie Nemzura
171 N. Clark Street
Chicago, IL 60601

VPCAO

Anthony J. Park
4050 Calle Real
Santa Barbara, CA 93110