

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V66355** (1)

1. Corporation Name

HILCOAST TITLE INSURANCE AGENCY, INC.



Principal Place of Business

**100 CENTURY BLVD.
WEST PALM BEACH FL 33417**

Mailing Address

**100 CENTURY BLVD.
WEST PALM BEACH FL 33417**

3. Date Incorporated or Qualified

09/24/1992

3a. Date of Last Report

04/27/1995

2. Principal Place of Business

21 19146 Lyons Road

Suite, Apt. #, etc.

22

City & State

23 Boca Raton, FL 33434

Zip

Country

24

2a. Mailing Address

26 19146 Lyons Road

Suite, Apt. #, etc.

27

City & State

28 Boca Raton, FL 33434

Zip

Country

29

30

4. FEI Number

65-0357512

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**JAIVEN, JACK
100 CENTURY BLVD.
WEST PALM BEACH FL 33417**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

19146 Lyons Road

83

84 City

Boca Raton,

FL

85 Zip Code

33434

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **LEVY, H. IRWIN**
STREET ADDRESS **100 CENTURY BLVD.**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **DP** ☐ DELETE

NAME **RUBIN, MICHAEL S.**
STREET ADDRESS **100 CENTURY BLVD.**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **DVTS** ☐ DELETE

NAME **JAIVEN, JACK**
STREET ADDRESS **100 CENTURY BLVD.**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **V** ☒ DELETE

NAME **SELDOMRIDGE, ROBERT D.**
STREET ADDRESS **100 CENTURY BLVD**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **V** ☐ DELETE

NAME **RICH, MICHAEL A.**
STREET ADDRESS **100 CENTURY BLVD**
CITY-ST-ZIP **WEST PALM BCH FL**

TITLE **V** ☐ DELETE

NAME **COHEN, HAROLD**
STREET ADDRESS **100 CENTURY BLVD**
CITY-ST-ZIP **WEST PALM BEACH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**19146 Lyons Road
Boca Raton, FL 33434**

**19146 Lyons Road
Boca Raton, FL 33434**

V ☐ Change ☒ Addition

**Merola, Mary Jane
100 Century Blvd.
West Palm Beach, FL 33417**

X Change ☐ Addition

**19146 Lyons Road
Boca Raton, FL 33434**

X Change ☐ Addition

**19146 Lyons Road
Boca Raton, FL 33434**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Jack Jaiven, Vice Pres. 03/22/96 (407) 487-9630

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

2-7

Hilcoast Title Insurance Agency, Inc.
additions to Corporation Annual Report - 1996
Document #V66355

V
Luca, Anne
19146 Lyons Road
Boca Raton, FL 33434