

| No. C 193957   |                    | Due no later than Mar 31, 2014<br><b>Annual Report Form</b>   |              | 2. Registered Agent and Address ( <b>NO PO BOX</b> )                      |         |  |  |
|--|--------------------|---|--------------|---|---------|--|--|
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                    | 1. Mailing Address: <b>Correct in this box if needed.</b><br><br>NATIONAL TITLE INSURANCE OF NEW YORK INC.<br>MADELINE LOVEJOY<br>2510 N. REDHILL AVENUE<br>SANTA ANA CA 92705<br>USA |              | C T CORPORATION SYSTEM<br>921 S ORCHARD ST STE G<br>BOISE ID 83705<br>USA |         |  |  |
|  |                    |   |              |   |         | 3. <u>New</u> Registered Agent Signature:* |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).  |                    |   |              |   |         |  |  |
| Office Held  | Name               | Street or PO Address  | City         | State   | Country | Postal Code                                |  |
| DIRECTOR   | RAYMOND R QUIRK    | 601 RIVERSIDE AVENUE  | JACKSONVILLE | FL  | USA     | 32204                                      |  |
| DIRECTOR   | MICHAEL L GRAVELLE | 601 RIVERSIDE AVENUE  | JACKSONVILLE | FL  | USA     | 32204                                      |  |
| TREASURER  | DANIEL K MURPHY    | 601 RIVERSIDE AVENUE  | JACKSONVILLE | FL  | USA     | 32204                                      |  |
| SECRETARY  | MICHAEL L GRAVELLE | 601 RIVERSIDE AVENUE  | JACKSONVILLE | FL  | USA     | 32204                                      |  |
| PRESIDENT  | RAYMOND R QUIRK    | 601 RIVERSIDE AVENUE  | JACKSONVILLE | FL  | USA     | 32204                                      |  |
| 5. Organized Under the Laws of:<br><br><b>NY</b><br><b>C 193957</b>  |                    | 6. Annual Report must be signed.*<br><br>Signature: Madeline Lovejoy<br>Name (type or print): Madeline Lovejoy  |              |   |         |  |  |
|  |                    | Date: 03/19/2014<br>Title: Asst. VP and Asst. Secretary   |              |   |         |  |  |
| Processed 03/19/2014   |                    | * Electronically provided signatures are accepted as original signatures.   |              |   |         |  |  |