

No. <b>C 42125</b>		Due no later than Mar 31, 2008 <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  TITLEFACT, INC. RICHARD B STIVERS P.O. BOX 486 TWIN FALLS ID 83303		RICHARD B STIVERS 163 4TH AVE. N. TWIN FALLS ID 83301		
				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
PRESIDENT	RICHARD B STIVERS	391 EDWARDS DRIVE	TWIN FALLS	ID	USA	83301
SECRETARY	SUSAN E WATERS	3168 HIGHLAWN DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	WINIFRED STIVERS	144 NORTH JUNIPER	TWIN FALLS	ID	USA	83301
DIRECTOR	SUSAN E WATERS	3168 HIGHLAWN DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	RICHARD B STIVERS	391 EDWARD DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	ROBERT TODD BLASS	2007 POLELINE ROAD EAST	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:  <b>ID C 42125</b>		6. Annual Report must be signed.* Signature: Richard B. Stivers Name (type or print): Richard B. Stivers Date: 01/09/2008 Title: President				
Processed 01/09/2008		* Electronically provided signatures are accepted as original signatures.				