

No. <b>W 91534</b>		<b>Due no later than Mar 31, 2012</b> <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>1. Mailing Address: Correct in this box if needed.</b>  FIDELITY NATIONAL MANAGEMENT SERVICES, LLC MADELINE LOVEJOY 2510 N REDHILL AVE SANTA ANA CA 92705		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	CHICAGO TITLE INSURANCE COMPANY	601 RIVERSIDE AVE.	JACKSONVILLE	FL	USA	32204	
5. Organized Under the Laws of:  <b>DE</b> <b>W 91534</b>		6. Annual Report must be signed.*  Signature: Madeline Lovejoy Name (type or print): Madeline Lovejoy					
Processed 02/03/2012		Date: 02/03/2012 Title: Avp&As  * Electronically provided signatures are accepted as original signatures.					