

|  |                |  |            |  |         |                               |  |
|--|----------------|--|------------|--|---------|-------------------------------|--|
| No. <b>C 183904</b>  |                | <b>Due no later than Jul 31, 2017</b>  |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>                         |         |                               |  |
| Return to:<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> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>VANTAGE POINT TITLE, INC.<br>IAN GORMAN<br>25400 US HWY 19 N<br>135<br>CLEARWATER FL 33763 |            | NATIONAL REGISTERED AGENTS INC<br>921 S ORCHARD ST STE G<br>BOISE ID 83705 |         |                               |  |
|  |                |  |            | 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                   |  |
| SECRETARY  | IAN GORMAN     | 25400 US 19 N STE 135  | CLEARWATER | FL   | USA     | 33763                         |  |
| PRESIDENT  | ROBERT JACKSON | 25400 US 19 N STE 135  | CLEARWATER | FL   | USA     | 33763                         |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |            |  |         |                               |  |
| <b>FL</b><br><b>C 183904</b>   |                | Signature: Robert Grisko   |            |  |         | Date: 07/06/2017              |  |
|  |                | Name (type or print): Robert Grisko  |            |  |         | Title: Director of Accounting |  |
| Processed 07/06/2017   |                | * Electronically provided signatures are accepted as original signatures.  |            |  |         |                               |  |