

No. C 169086		Due no later than Sep 30, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. EQUITY NATIONAL TITLE & CLOSING SERVICES, INC. CHRIS CAPEZZERA 5851 LEGACY CIRCLE SUITE 600 PLANO TX 75024 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G 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	
TREASURER	TIMOTHY DAVIN	50 JORDAN STREET SUITE 100	EAST PROVIDENCE	RI	USA	02914	
PRESIDENT	JAMES K O'DONNELL	50 JORDAN STREET SUITE 100	EAST PROVIDENCE	RI	USA	02914	
SECRETARY	MEGHAN HANDY	50 JORDAN STREET SUITE 100	EAST PROVIDENCE	RI	USA	02914	
5. Organized Under the Laws of: RI C 169086		6. Annual Report must be signed.* Signature: Chris Capezzera Name (type or print): Chris Capezzera		Date: 08/02/2017 Title: Claims/Compliance Officer			
Processed 08/02/2017		* Electronically provided signatures are accepted as original signatures.					