No. C 101810 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Apr 30, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. NORTH IDAHO TITLE INSURANCE, INC. PATRICIA A LAFFIN 1508 EUREKA ROAD #130 ROSEVILLE CA 95661		2. Registered Agent and Address (NO PO BOX) RICK BROWN 601 E FRONT AVE STE 204 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
SECRETARY TREASURER DIRECTOR PRESIDENT	REASURER DAVID M. PHILIPP RECTOR MARSHA A. SPENCE		1508 EUREKA ROAD. #130 189 FULWEILER AVE 1508 EUREKA ROAD SUITE 100 601 E. FRONT AVE., STE. 204	ROSEVILLE AUBURN ROSEVILLE COEUR D'ALENE	CA CA CA ID	USA USA USA USA	95661 95603 95661 83814
5. Organized Under the Laws of: 6. Annua		6. Annual Report r	Annual Report must be signed.*				
ID C 101810		Signature: GINGER CRAWFORD		Date: 04/15/2016			
		Name (type or print): GINGER CRAWFORD		Title: Legal Services Administrator			
Processed 04/15/2016		* Electronically pro	vided signatures are accepted as original si	ignatures.			