

No. C 203350		Due no later than Sep 30, 2018		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. NORTH AMERICAN TITLE INSURANCE COMPANY LORA L OSTERLOH 1855 GATEWAY BLVD STE 600 600 CONCORD CA 94520 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
PRESIDENT	EMILIO FERNANDEZ	760 NW 107 AVENUE SUITE 400	MIAMI	FL	33172
SECRETARY	JEFFERSON E HOWETH	760 NW 107TH AVE SUITE 400	MIAMI	FL	33172
DIRECTOR	CLOTILDE C KELLER	760 NW 107 AVENUE SUITE 400	MIAMI	FL	USA 33172
DIRECTOR	THOMAS J FISCHER	760 NW 107 AVE SUITE 400	MIAMI	FL	USA 33172
DIRECTOR	EMILIO FERNANDEZ	760 NW 107 AVENUE SUITE 400	MIAMI	FL	USA 33172
5. Organized Under the Laws of: CA C 203350		6. Annual Report must be signed.* Signature: Lora L. Osterloh Name (type or print): Lora L. Osterloh Date: 07/30/2018 Title: Paralegal			
Processed 07/30/2018		* Electronically provided signatures are accepted as original signatures.			