

No. C 154937		Due no later than Jun 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. SERVICELINK TITLE AGENCY, INC. GREGORY PLIZGA 1400 CERRINGTON PARKWAY MOON TOWNSHIP PA 15108		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	DANIEL K MURPHY	601 RIVERSIDE AVENUE	JACKSONVILLE	FL	USA	32204	
DIRECTOR	MICHAEL L GRAVELLE	1701 VILLAGE CENTER CIRCLE 2ND FLOOR	LAS VEGAS	NV	USA	89134	
SECRETARY	MICHAEL L GRAVELLE	1701 VILLAGE CENTER CIRCLE 2ND FLOOR	LAS VEGAS	NV	USA	89134	
DIRECTOR	SUSAN B FALSETTI	400 CORPORATION DRIVE	ALIQUIPPA	PA	USA	15001	
PRESIDENT	SUSAN B FALSETTI	400 CORPORATION DRIVE	ALIQUIPPA	PA	USA	15001	
5. Organized Under the Laws of: IL C 154937		6. Annual Report must be signed.* Signature: Michael L Gravelle Name (type or print): Michael L Gravelle					
		Date: 06/07/2017 Title: Secretary					
Processed 06/07/2017 * Electronically provided signatures are accepted as original signatures.							