

No. C 42125	Due no later than Mar 31, 2007 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. TITLEFACT, INC. RICHARD B STIVERS P.O. BOX 486 TWIN FALLS ID 83303	RICHARD B STIVERS 163 4TH AVE. N. TWIN FALLS ID 83301 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	RICHARD B STIVERS	391 EDWARDS DRIVE	TWIN FALLS	ID	USA	83301
SECRETARY	SUSAN E WATERS	3168 HIGHLAWN DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	WINIFRED STIVERS	144 NORTH JUNIPER	TWIN FALLS	ID	USA	83301
DIRECTOR	SUSAN E WATERS	3168 HIGHLAWN DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	RICHARD B STIVERS	391 EDWARD DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	ROBERT TODD BLASS	2007 POLELINE ROAD EAST	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: IDAHO C 42125	6. Annual Report must be signed.* Signature: RICHARD B. STIVERS Name (type or print): RICHARD B. STIVERS		Date: 01/12/2007 Title: PRESIDENT			
Processed 01/12/2007		* Electronically provided signatures are accepted as original signatures.				