

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 828349 (1)
 1. Corporation Name
FIRST AMERICAN TITLE INSURANCE COMPANY



Principal Place of Business 114 EAST FIFTH STREET SANTA ANA CA 92701-1699	Mailing Address 114 EAST FIFTH STREET SANTA ANA CA 92701-4642
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/21/1972	3a. Date of Last Report 03/13/1996
21	26	4. FEI Number 95-2566122		Applied For Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent FLORIDA INSURANCE COMMISSIONER THE CAPITOL BLDG. TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent		
				81. Name		
				82. Street Address (P.O. Box Number is Not Acceptable)		
				83.		
				84. City	FL	85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNEDY, PARKER S.	1.2 NAME	
STREET ADDRESS	114 E. 5TH ST.	1.3 STREET ADDRESS	
CITY - ST - ZIP	SANTA ANA, CA 92701	1.4 CITY - ST - ZIP	
TITLE	VS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARNESEN, MARK R	2.2 NAME	
STREET ADDRESS	114 E FIFTH ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	SANTA ANA CA	2.4 CITY - ST - ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLEMENS, THOMAS A	3.2 NAME	
STREET ADDRESS	114 E FIFTH ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	SANTA ANA, CA 92701	3.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHATHAM, J. DAVID	4.2 NAME	
STREET ADDRESS	11095 HOUZE ROAD, STE 200	4.3 STREET ADDRESS	
CITY - ST - ZIP	ROSWELL GA	4.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOUGLAS, LEWIS W., JR.	5.2 NAME	
STREET ADDRESS	1776 LINCOLN ST S410	5.3 STREET ADDRESS	
CITY - ST - ZIP	DENVER CO	5.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, WILLIAM G.	6.2 NAME	
STREET ADDRESS	PO BOX 270 NA - STE 3000 IBM TOWER	6.3 STREET ADDRESS	
CITY - ST - ZIP	TORONTO, CANADA	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mark R. Arnesen* **4/14/97 314-358-3211**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MARK R. ARNESEN, Vice President & Secretary Date Daytime Phone #

CR2E034 (9/96)

OFFICERS AND DIRECTORS
(continued)

7.1	Title	D
7.2	Name	George L. Argyros
7.3	Address	950 South Coast Drive, Suite 200
7.4	City, State, Zip	Costa Mesa, CA 92626
8.1	Title	D
8.2	Name	James L. Doti
8.3	Address	333 North Glassell
8.4	City, State, Zip	Orange, CA 92666
9.1	Title	D
9.2	Name	Paul B. Fay, Jr.
9.3	Address	3766 Clay Street
9.4	City, State, Zip	San Francisco, CA 94118
10.1	Title	D
10.2	Name	Gary J. Beban
10.3	Address	533 South Fremont Avenue
10.4	City, State, Zip	Los Angeles, CA 90071-1798
11.1	Title	D
11.2	Name	Philip B. Branson
11.3	Address	7833 Haskell Avenue
11.4	City, State, Zip	Van Nuys, CA 91406
12.1	Title	D/C
12.2	Name	D. P. Kennedy
12.3	Address	114 East Fifth Street
12.4	City, State, Zip	Santa Ana, CA 92701
13.1	Title	D
13.2	Name	Robert B. McLain
13.3	Address	4 Corporate Plaza, Suite 203
13.4	City, State, Zip	Newport Beach, CA 92660
14.1	Title	D
14.2	Name	Anthony R. Moiso
14.3	Address	28811 Ortega Highway
14.4	City, State, Zip	San Juan Capistrano, CA 92675
15.1	Title	D
15.2	Name	Rudolph J. Munzer
15.3	Address	401 East Ocean Blvd., Suite 501
15.4	City, State, Zip	Long Beach, CA 90802

ADDITION

16.1	Title	D	
16.2	Name	Roslyn B. Payne	
16.3	Address	4 Embarcadero Center, Suite 3620	
16.4	City, State, Zip	San Francisco, CA 94111	
17.1	Title	D	
17.2	Name	John W. Long	
17.3	Address	18167 U.S. 19 North, Suite 600	
17.4	City, State, Zip	Clearwater, FL 34624	
18.1	Title	D	
18.2	Name	Robert J. Swadey	
18.3	Address	One Erieview Plaza	
18.4	City, State, Zip	Cleveland, OH 44114	
19.1	Title	D	
19.2	Name	Virginia Ueberroth	
19.3	Address	P. O. Box 100	
19.4	City, State, Zip	Laguna Beach, CA 92652-0100	
20.1	Title	V/D	CHANGE
20.2	Name	Gary L. Kermott	
20.3	Address	114 East Fifth Street	
20.4	City, State, Zip	Santa Ana, CA 92701	
21.1	Title	D	
21.2	Name	Frank E. O'Bryan	
21.3	Address	4330 Barranca Parkway, Suite 150	
21.4	City, State, Zip	Irvine, CA 92701	
22.1	Title	D	CHANGE
22.2	Name	Dale F. Frey	
22.3	Address	3003 Summer Street	
22.4	City, State, Zip	Stamford, CT 06904-7900	
23.1	Title	D	
23.2	Name	James M. Orphanides	
23.3	Address	228 East 45 th Street	
23.4	City, State, Zip	New York, NY 10017-3303	
24.1	Title	V	ADDITION
24.2	Name	Craig I. DeRoy	
24.3	Address	114 East Fifth Street	
24.4	City, State, Zip	Santa Ana, CA 92701	