

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90154 026 ***150.00

GENERAL 11

DOCUMENT # P06462

1. Entity Name
UNITED GENERAL TITLE INSURANCE COMPANY



Principal Place of Business 999 18TH STREET SUITE 3400 DENVER CO 80202	Mailing Address 999 18TH STREET SUITE 3400 DENVER CO 80202
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State	4. FEI Number 72-0976930	Applied For Not Applicable
Zip	Country	Zip	Country



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER
THE CAPITOL BUILDING
TALLAHASSEE FL 32399**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DWYER, JOHN P JR 999 18TH ST STE 3400 DENVER CO 80202 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KELLERMAN, HENRY R 5030 SADLER PLACE, #110 GLEN ALLEN VA 23060 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GARCIA, PATRICIA A 999 18TH ST STE 3400 DENVER CO 80202 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V EDWARDS, ROBERT T 999 18TH ST STE 3400 DENVER CO 80202 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARNEY, CHARLES A 4200 N, HICKORY LANE KANSAS CITY MO 64116 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V REDDING, TIMOTHY 999 18TH ST SUITE 3400 DENVER CO 80202 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition SEE ATTACHMENT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SIGNATURE REQUIRED** 303-292-4848

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John P. Dwyer, Jr., President Date _____ Daytime Phone # _____

CR2E034 (10/02)

ATTACHMENT
TO

20012875

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P06462

UNITED GENERAL TITLE INSURANCE COMPANY
999 18TH STREET, SUITE 3400
DENVER, CO 80202

ITEM 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ITEM 10.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARNEY, CHARLES A. 1201 NW BRIARCLIFF PARKWAY KANSAS CITY, MO 64116	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KELLERMANN, HENRY R. 5030 SADLER PLACE, #110 GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDRESS, JERRY EDWIN 114 ROBERT AVENUE - P.O. BOX 5240 INCLINE VILLAGE, NV 89450	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOVALESKI, CHARLES JAMES 6545 CORPORATE CENTRE BOULEVARD ORLANDO, FL 32822	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSTON, ELBERT WAYNE 8141 E. 2 ND STREET, SUITE 603 DOWNEY, CA 90241	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MORAN, PAUL JOSEPH 999 18 TH STREET, SUITE 3400 DENVER, CO 80202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WILLIS, BRYAN ROSS 999 18 TH STREET, SUITE 3400 DENVER, CO 80202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition