2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2013
Secretary of State
CC1640750807

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Entity Name: PREMIER LAND TITLE INSURANCE COMPANY

Current Principal Place of Business:

100 BLOOMFIELD HILLS PARKWAY
SUITE 300
BLOOMFIELD HILLS, MI 48304

Current Mailing Address:

100 BLOOMFIELD HILLS PARKWAY
SUITE 300
BLOOMFIELD HILLS, MI 48304 US

FEI Number: 93-1163025

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR AND PRESIDENT
Name	PRUITT, RONALD
Address	100 BLOOMFIELD HILLS PARKWAY STE 300
City-State-Zip:	BLOOMFIELD HILLS MI 48304

Title	TREASURER, VICE PRESIDENT AND CONTROLLER
Name	CAMPBELL, PATRICIA L
Address	100 BLOOMFIELD HILLS PARKWAY STE 300
City-State-Zip:	BLOOMFIELD HILLS MI 48304

Title	ASST VICE PRESIDENT
Name	ANDERSON, CADE
Address	100 BLOOMFIELD HILLS PARKWAY SUITE 300
City-State-Zip:	BLOOMFIELD HILLS MI 48304

Title	DIRECTOR, SR VICE PRESIDENT, GENERAL COUNSEL AND ASST SECRETARY
Name	SULLIVAN, MICHAEL
Address	100 BLOOMFIELD HILLS PARKWAY STE 300
City-State-Zip:	BLOOMFIELD HILLS MI 48304

Title	ASSISTANT VICE PRESIDENT
Name	SMITH, JENNAE
Address	100 BLOOMFIELD HILLS PARKWAY STE 300
City-State-Zip:	BLOOMFIELD HILLS MI 48304

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CADE ANDERSON ASST VICE PRESIDENT 04/17/2013

Electronic Signature of Signing Officer/Director Detail — Date