

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004110

FILED
Feb 28, 2019
Secretary of State
1369604887CC

Entity Name: ENTITLE INSURANCE COMPANY

Current Principal Place of Business:

3 SUMMIT PARK DRIVE
#525
INDEPENDENCE, OH 44131

Current Mailing Address:

1500 MARKET STREET
SUITE 2050W
PHILADELPHIA, PA 19102 US

FEI Number: 34-1252928

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 PRESIDENT
Name REILLY, TIMOTHY M.
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131

Title SENIOR VICE PRESIDENT
Name RADICIONI, ROBERT V.
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131

Title DIRECTOR, SECRETARY
Name HOFFMAN, EDWARD J.
Address 1601 MARKET STREET
 11TH FLOOR
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR
Name THORNBERRY, RICHARD G.
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131

Title DIRECTOR
Name BRUMMER, DEREK
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131

Title DIRECTOR
Name MCMAHON, BRIEN
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131

Title DIRECTOR, CHIEF FINANCIAL
 OFFICER
Name HALL, J. FRANKLIN
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131

Title DIRECTOR
Name RAY, ERIC
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131

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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: ROBERT V. RADICIONI

SENIOR VICE PRESIDENT 02/28/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DEVANEY, ZOE L.
Address 3 SUMMIT PARK DRIVE
 #525
City-State-Zip: INDEPENDENCE OH 44131