

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000003171

**Entity Name:** SECURE TITLE ADMINISTRATION, INC.

**Current Principal Place of Business:**

ONE REYNOLDS WAY  
DAYTON, OH 45430

**FILED**  
**Apr 18, 2017**  
**Secretary of State**  
**CC4339699728**

**Current Mailing Address:**

ONE REYNOLDS WAY  
DAYTON, OH 45430

**FEI Number: 47-4410338**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 C  
Name BROCKMAN, ROBERT T  
Address 6700 HOLLISTER  
City-State-Zip: HOUSTON TX 77040

Title D  
Name DEATON, ALFRED L III  
Address 408 LITTLE JOHN LANE  
City-State-Zip: HOUSTON TX 77024

Title P  
Name NALLEY, ROBERT M  
Address 6700 HOLLISTER  
City-State-Zip: HOUSTON TX 77040

Title VP  
Name ROBINSON, SHERI  
Address 6700 HOLLISTER  
City-State-Zip: HOUSTON TX 77040

Title S  
Name MOSS, M.CRAIG  
Address 6700 HOLLISTER  
City-State-Zip: HOUSTON TX 77040

Title T  
Name BURNETT, ROBERT D  
Address 6700 HOLLISTER  
City-State-Zip: HOUSTON TX 77040

Title EXECUTIVE VICE PRESIDENT  
Name BARRAS, NORMAN T  
Address 6700 HOLLISTER  
City-State-Zip: HOUSTON TX 77040

Title EXECUTIVE VICE PRESIDENT  
Name JONES, TERRY W  
Address 6700 HOLLISTER  
City-State-Zip: HOUSTON TX 77040

**Continues on page 2**

*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: MARK F BALES**

**ASSISTANT SECRETARY 04/18/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASSISTANT SECRETARY  
Name BALES, MARK F  
Address ONE REYNOLDS WAY  
City-State-Zip: KETTERING OH 45430