

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 811066

1. Entity Name

NATIONS TITLE INSURANCE OF NEW YORK INC.

Principal Place of Business

2 PARK AVE
3RD FLOOR
NEW YORK NY 10016
US

Mailing Address

17911 VON KARMAN AVE
SUITE 300
IRVINE CA 92614
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 11-0907410

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
THE CAPITAL
TALLAHASSEE FL 32304

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
FOLEY, WILLIAM P II
3916 STATE STREET, SUITE 300
SANTA BARBARA CA 93105 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
address
4050 Calle Real, Suite 200
Santa Barbara, CA 93110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
STONE, PATRICK F
3938 STATE STREET, 2ND FLOOR
SANTA BARBARA CA 93105 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
address
4050 Calle Real, Suite 200
Santa Barbara, CA 93110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
STINSON, ALAN L
3916 STATE STREET, SUITE 300
SANTA BARBARA CA 93105 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
address
4050 Calle Real, Suite 200
Santa Barbara, CA 93110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVPD
WIMER, CHARLES H
2 PARK AVE 3RD FLOOR
NEW YORK NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
RICHARDS, JONATHAN A
2 PARK AVE 3RD FLOOR
NEW YORK NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
QUINTERNO, CHRISTOPHER J
2 PARK AVE 3RD FLOOR
NEW YORK NY ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brad J. Brigante, Secretary

Date Daytime Phone #

3/1/01



DO NOT WRITE IN THIS SPACE

05/1407

CR2E034 (10/00)



NATIONS TITLE INSURANCE OF NEW YORK, INC.

17911 Von Karman Avenue • Suite 300 • Irvine • California 92614

Phone (714) 622-4333 • (800) 713-9291

811060
Attachment

520/79

March 27, 2001

Secretary of State - Florida
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Nations Title Insurance Company of New York Inc.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed is the following:

1. One (1) original and one (1) copy of the executed Uniform Business Report for the above referenced corporation; and
2. Our check number 32002524, made payable to the Secretary of State in the amount of \$150.00 to cover required filing fees and a return certified copy.

Please acknowledge receipt of the foregoing by endorsing and returning the enclosed copy of the Report in the self-addressed, stamped envelope. If you have any questions regarding this filing, feel free to contact the undersigned.

Very truly yours,

Madeline Barewald
Corporate Paralegal

Telephone: (949) 622-4351

Facsimile: (949) 622-4104

E-mail: mbarewald@fnf.com

Enclosures

Attachment
8/1/06

NATIONS TITLE INSURANCE OF NEW YORK INC.

Directors & Senior Officers

FEIN 11-0907410

520179

DIRECTORS

William P. Foley, II
Alan L. Stinson
Patrick F. Stone
Charles Wimer
Joseph N. Friedman
Jonathan A. Richards

OFFICERS: 4050 Calle Real, Suite 200, Santa Barbara, CA 93110

William P. Foley, II	Chairman of the Board
Patrick F. Stone	President
Alan L. Stinson	Chief Financial Officer
Patrick G. Farenga	Vice President, Treasurer
Brad J. Brigante	Senior Vice President, Secretary
Frank P. Willey	Executive Vice President
Charles H. Wimer	Executive Vice President
Ronald R. Maudsley	Executive Vice President
Joseph N. Friedman	Senior Vice President
Jill Martin	Senior Vice President, Banking and Administration
Janice L. Oates	Senior Vice President, Escrow Administration
Donald E. Partington	Senior Vice President, General Counsel
Jonathan A. Richards	Senior Vice President, Senior Counsel, Assistant Secretary
Peter T. Sadowski	Senior Vice President
Mark E. Schiffman	Senior Vice President
Darryl J. Tyson	Senior Vice President, Regional Manager
Kevin Chiarello	Vice President, Government Affairs
Richard Cox	Vice President, Tax
Marjorie Nemzura	Vice President, Assistant Secretary
Eileen W. Van Roeyen	Vice President, Assistant Secretary
Hilary B. Burkemper	Assistant Vice President, Assistant Secretary