

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005778

FILED
Apr 22, 2009
Secretary of State

Entity Name: WESTCOR LAND TITLE INSURANCE COMPANY

Current Principal Place of Business:

201 N. NEW YORK AVE
STE. 200
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

201 N. NEW YORK AVE
STE. 200
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 88-0294251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWER, PATRICIA W
C/O WESTCOR LAND TITLE INS., CO
201 N NEW YORK AVE, STE 200
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WRIGHT, TERRENCE L
Address: 1500 CHAMPION HILLS LANE
City-St-Zip: LAS VEGAS, NV 89134

Title: D () Delete
Name: LASSITER, ROY
Address: 1033 CREEKS BEND DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: PD () Delete
Name: O'DONNELL, MARY
Address: 401 E ROBINSON ST
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: GRAHAM, ROBBIE D
Address: 1516 BREEZE CANYON DRIVE
City-St-Zip: LAS VEGAS, NV 89117

Title: D () Delete
Name: PHILIPP, DAVID
Address: 3084 FARICHILD DR.
City-St-Zip: EL DORADO HILLS, CA 95762

Title: T () Delete
Name: SCHEFSTAD, MICHAEL
Address: 817 GLEN ARDEN WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LASSITER, ROY
Address: 315 VIRGINIA AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: PD (X) Change () Addition
Name: O'DONNELL, MARY
Address: 400 EAST COLONIAL DRIVE #1709
City-St-Zip: ORLANDO, FL 32803

Title: D (X) Change () Addition
Name: GRAHAM, ROBBIE D
Address: 1200 MCDONALD AVENUE
City-St-Zip: PRESCOTT, AZ 86303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL SCHEFSTAD

T

04/22/2009

Electronic Signature of Signing Officer or Director

Date