

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 08, 2005 8:00 am**  
**Secretary of State**

02-08-2005 90011 026 \*\*\*150.00

**DOCUMENT # F02000005657**

1. Entity Name  
**FIRST AMERICAN TITLE INSURANCE COMPANY OF TEXAS**



Principal Place of Business  
**1500 SOUTH DAIRY ASHFORD, SUITE 300  
HOUSTON, TX 77077**

Mailing Address  
**1 FIRST AMERICAN WAY  
SANTA ANA, CA 92707**

**50011775**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01262005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

**74-0891060**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CHIEF FINANCIAL OFFICER  
P.O. BOX 6200 32314-6200  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME BOIS, MELVILLE R  
STREET ADDRESS 7777 WASHINGTON AVE. SOUTH  
CITY-ST-ZIP MINNEAPOLIS, MN 55439

TITLE S ☒ Delete  
NAME MOORE, DAWN K  
STREET ADDRESS 2100 MCKINNEY AVE., #1200  
CITY-ST-ZIP DALLAS, TX 75201

TITLE T ☐ Delete  
NAME VELTRI, STEPHEN P  
STREET ADDRESS 3200 E. CAMELBACK RD., #105  
CITY-ST-ZIP PHOENIX, AZ 85018

TITLE D ☐ Delete  
NAME KERMOTT, GARY L  
STREET ADDRESS 1 FIRST AMERICAN WAY  
CITY-ST-ZIP SANTA ANA, CA 92707

TITLE D ☒ Delete  
NAME ROWLAND, DENNIE L  
STREET ADDRESS 1 FIRST AMERICAN WAY  
CITY-ST-ZIP SANTA ANA, CA 92707

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SVP ☐ Change ☒ Addition  
NAME Janine Andriole  
STREET ADDRESS 7777 Washington Ave. South  
CITY-ST-ZIP Edina, MN 55439

TITLE VP/S ☐ Change ☒ Addition  
NAME Kathleen M. Collins  
STREET ADDRESS 1 First American Way  
CITY-ST-ZIP Santa Ana, CA 92707

TITLE D ☐ Change ☒ Addition  
NAME Donald J. Casey  
STREET ADDRESS 308 Route 38  
CITY-ST-ZIP Moorestown, NJ 08057

TITLE D ☐ Change ☒ Addition  
NAME Craig I. DeRoy  
STREET ADDRESS 1 First American Way  
CITY-ST-ZIP Santa Ana, CA 92707

TITLE D ☐ Change ☒ Addition  
NAME David J. Weaving  
STREET ADDRESS 1 Campus Drive  
CITY-ST-ZIP Parsippany, NJ 07054

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Kathleen M. Collins*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/05

Date

Daytime Phone #