2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F03000001973 1. Entity Name LANDAMERICA INSURANCE AGENCY, INC.

Principal Place of Business

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST- 7IP

CITY - ST - ZIP

PERRINE, WM. C

SVPT

RICHMOND, VA 23235

RICHMOND, VA 23235

RAMOS, RONALD B

101 GATEWAY CENTRE PKWY GATEWAY ONE

101 GATEWAY CENTRE PKWY GATEWAY ONE



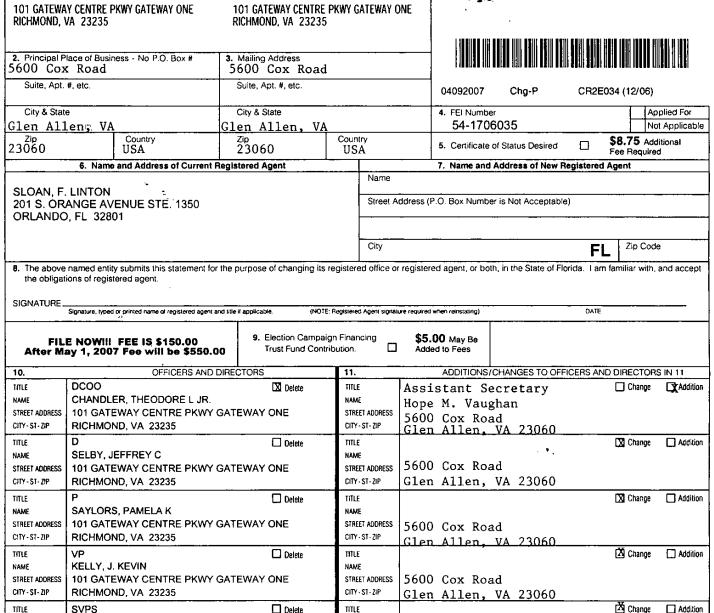
Mailing Address

101 GATEWAY CENTRE PKWY GATEWAY ONE

FILED Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90216 009 ***150.00

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

NAME

TITLE

NAME

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IE

5600 Cox Road

5600 Cox Road

Glen Allen, VA 23060

Glen Allen, VA 23060

🔼 Change

☐ Addition

SIGNATURE: Sope M. Vauchan	Норе М.	Vaughan	4-24-2007	(804)267-8	69
PIGNATURE AND TYPER OF PRINTED NAME OF PIGNING OFFICER OR DIRECTOR		Dat	le	Daylime Phone #	_