

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001170

FILED  
Jan 05, 2010  
Secretary of State

**Entity Name:** AMERICAN GUARANTY TITLE INSURANCE COMPANY

**Current Principal Place of Business:**

100 SOUTH ASHLEY DRIVE  
STE. 700  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

400 SECOND AVENUE SOUTH  
MINNEAPOLIS, MN 55401 US

**New Mailing Address:**

**FEI Number:** 73-1071885

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PIERCE, SCOTT  
100 SOUTH ASHLEY DRIVE  
STE. 700  
TAMPA, FL 33602 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:** PCEO  
**Name:** BILBREY, MARK A  
**Address:** 777 POST OAK BLVD., STE 240  
**City-St-Zip:** HOUSTON, TX 77056 US

**Title:** SVPF  
**Name:** HORN, GARY J  
**Address:** 400 SECOND AVENUE SOUTH  
**City-St-Zip:** MINNEAPOLIS, MN 55401 US

**Title:** VPSD  
**Name:** WOLD, DANIEL M  
**Address:** 400 SECOND AVENUE SOUTH  
**City-St-Zip:** MINNEAPOLIS, MN 55401 US

**Title:** VPT  
**Name:** TARPEY, MICHAEL T  
**Address:** 400 SECOND AVENUE SOUTH  
**City-St-Zip:** MINNEAPOLIS, MN 55401 US

**Title:** VPD  
**Name:** HASSEN, DAN M  
**Address:** 777 POST OAK ROAD, STE. 240  
**City-St-Zip:** HOUSTON, TX 77056 US

**Title:** D  
**Name:** YEAGER, RANDE K  
**Address:** 400 SECOND AVE SO  
**City-St-Zip:** MINNEAPOLIS, MN 55401

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:** MICHAEL TARPEY

VPT

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date