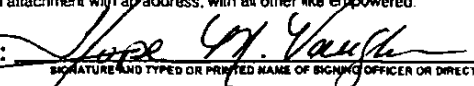


FILED
Jun 07, 2007 8:00 am
Secretary of State

05-09-2007 90103 019 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F06000000809			
1. Entity Name LANDAMERICA ALLIANCE COMPANY			
Principal Place of Business 101 GATEWAY CENTRE PARKWAY RICHMOND, VA 23235		Mailing Address 101 GATEWAY CENTRE PARKWAY RICHMOND, VA 23235	
2. Principal Place of Business - No P.O. Box # 5600 Cox Road		3. Mailing Address 5600 Cox Road	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Glen Allen, VA		City & State Glen Allen, VA	
Zip 23060	Country USA	Zip 23060	Country USA
4. FEI Number 54-2022917		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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, 2007 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CHANDLER, JR., THEODORE L 101 GATEWAY CENTRE PARKWAY RICHMOND, VA 23235 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SVP Thomas R. Klein 5600 Cox Road Glen Allen, VA 23060 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BEDELL, PAUL M 101 GATEWAY CENTRE PARKWAY RICHMOND, VA 23235 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D P Jeffrey D. Vaughan 5600 Cox Road Glen Allen, VA 23060 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT RAMOS, RONALD B 101 GATEWAY CENTRE PARKWAY RICHMOND, VA 23235 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5600 Cox Road Glen Allen, VA 23060 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VAUGHAN, HOPE M 101 GATEWAY CENTRE PARKWAY RICHMOND, VA 23235 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5600 Cox Road Glen Allen, VA 23060 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KING, ANNA M 101 GATEWAY CENTRE PARKWAY RICHMOND, VA 23235 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5600 Cox Road Glen Allen, VA 23060 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Jeffrey C. Selby 5600 Cox Road Glen Allen, VA 23060 ☐ Change ☒ Addition
12. 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 address, with all other like empowered.			
SIGNATURE: 		Hope M. Vaughan 4-26-07 (804)267-8697	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	