2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000026935

FILED Sep 08, 2003 Secretary of State

Entity Nai	ne: UBUY TI	TLE INSURANCE.COM, INC.					
Current P	rincipal Plac	e of Business:	New Principal Place of Business:				
	ÆRSITY DRIN PRINGS, FL 3	/E, SUITE 520 33065					
Current Mailing Address:			New Mailing Address:				
	'ERSITY DRI\ PRINGS, FL 3	/E, SUITE 520 33065					
El Number: 65-1087293 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()			
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1744 COL	IENNIFER ONIAL DRIVE PRINGS, FL 3						
	named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered	I office or registered agent	t, or both,	
SIGNATU	RE:						
	Electro	nic Signature of Registered Age	ent		Date		
Election Car	npaign Financir	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	MOYA, ALLISC 2855 UNIVERS) Delete DN SITY DRIVE, SUITE 200 IGS, FL 33065	Title: Name: Address: City-St-Zip:	MADEJ, ALIS 2855 UNIVER	(X) Change () Addition SON RSITY DRIVE, SUITE 200 INGS, FL 33065		
Title:	S () Delete	Title:		() Change () Addition		

Address:

City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: BAZSULY, SUSAN J Name: MADEJ, ALISON 2855 UNIVERSITY DRIVE, SUITE 200 Address: Address: 2855 UNIVERSITY DRIVE, SUITE 200 City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALISON MADEJ P 09/08/2003

2855 UNIVERSITY DRIVE, SUITE 200

CORAL SPRINGS, FL 33065

Address: City-St-Zip: