2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000026776

Entity Name: COUNTRYWIDE TITLE COMPANY

FILED Nov 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

13902 N. DALE MABRY HWY SUITE 110 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

13902 N. DALE MABRY HWY SUITE 110 TAMPA, FL 33618

FEI Number: 02-0565010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LONG, LIVIA
2523 W DIANA ST
TAMPA, FL 33614 US
LONG, LIVIA
13902 N. DALE MABRY HIGHWAY
SUITE 110
TAMPA, FL 33618 US

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: 11/07/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D/PR (X) Change () Addition

Name: LONG, LIVIA Name: LONG, LIVIA

Address: 2523 W. DIANA STREET Address: 13902 N. DALE MABRY HIGHWAY, ST. 110

City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33618

Title: () Delete Title: VP () Change (X) Addition

Name: Name: WHILLOCK, MARQUE

Address: Address: 13902 N. DALE MABRY HIGHWAY, ST. 110

City-St-Zip: City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LIVIA LONG PRES 11/07/2006