2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026918

Entity Name: AMERICAN TITLE INSURANCE GROUP, INC.

FILED May 10, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

150 S. PINE ISLAND ROAD SUITE 540

PLANTATION, FL 33324 US

New Mailing Address:

10658 WHEELHOUSE CIRCLE

BOCA RATON, FL 33498

27990 CONVERSE ROAD ISLAND LAKE, IL 60042 US

Current Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

JONES, DAVID E 150 S. PINE ISLAND ROAD SUITE 540 PLANTATION, FL 33324 US JONES, DAVID E 10658 WHEELHOUSE CIRCLE BOCA RATON, FL 33498 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: DAVID E. JONES 05/10/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 Name:
 JONES, DAVID E

 Address:
 Address:
 10658 WHEELHOUSE CIRCLE

 City-St-Zip:
 BOCA RATON, FL 33498

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: DAVID E. JONES PRES 05/10/2004