


2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Aug 28, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000076655	
1. Entity Name USA LAND TITLE INC.	

Principal Place of Business P.O. Box 2399 Northbrook, IL 60065-2399	Mailing Address P.O. Box 2399 Northbrook, IL 60065-2399
---	---



08232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 57-1206046	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KWIATT, KENNETH 10088 GINGER POINTE CT BONITA SPRINGS, FL 34135
--

DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
--	--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,S KWIATT, DIANE 10088 GINGER POINTE CT BONITA SPRINGS, FL 34135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,V CIESLA, KATHRYN L 707 SKOKIE BOULEVARD, SUITE 405 NORTHBROOK, IL 60062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,P KWIATT, KENNETH L 10088 GINGER POINT CT BONITA SPRINGS, FL 34135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, T CURCIO, JOSEPH D 1512 WESTERN PARK RIDGE, IL 60068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CIESLA, ANNETTE H 535 HILLCREST BLVD. HOFFMAN ESTATES, IL 60195
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000772845 08/28/07-80006-006 150.00
DO NOT WRITE IN THIS SPACE

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 an address, with all other like empowered.
SIGNATURE: <i>Kenneth L. Kwiat, Acting Pres.</i> 8-24-07 847-412-1988 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>