2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08397

FILED Mar 20, 2009 Secretary of State

Entity Name: FIDELITY NATIONAL PROPERTY AND CASUALTY INSURANCE COMPANY

Current Principal Place of Business: New Principal Place of Business: 601 RIVERSIDE AVE. JACKSONVILLE, FL 32204 LIS **Current Mailing Address: New Mailing Address:** 2510 N. REDHILL AVE C/O MADELINE BAREWALD SANTA ANA, CA 92705 FEI Number: 16-0986300 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: CHIEF FINANCIAL OFFICER PO BOX 6200 (323214-6200) 200 E GAINES STREET TALLAHASSEE, FL 32399 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition JEWKES, ROGER S JEWKES, ROGER S Name: Name: 601 RIVERSIDE AVE. 4050 CALLE REAL Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 US City-St-Zip: SANTA BARBARA, CA 93110 US PCEO Title: Title: () Delete () Change () Addition Name: DAVEY, MARK O Name: 601 RIVERSIDE AVE. Address: Address: JACKSONVILLE, FL 32204 US City-St-Zip: City-St-Zip: Title: FVP () Delete Title: () Change () Addition STINSON, ALAN L Name: Name: 601 RIVERSIDE AVE. Address: Address: JACKSONVILLE, FL 32204 US City-St-Zip: City-St-Zip: Title: CFOD () Delete Title: () Change () Addition PARK, ANTHONY J Name: Name: Address: 601 RIVERSIDE AVE Address: City-St-Zip: JACKSONVILLE, FL 32204 US City-St-Zip: Title: SVPS Title: **EVPS** () Delete (X) Change () Addition JOHNSON, TODD C Name: GRAVELLE, MICHAEL L Name: **601 RIVERSIDE AVE** 4050 CALLE REAL Address: Address: JACKSONVILLE, FL 32204 US City-St-Zip: City-St-Zip: SANTA BARBARA, CA 93110 US Title: SVPT () Delete Title: SVPT (X) Change () Addition FARENGA, PATRICK G MURPHY, DANIEL K Name: Name: 601 RIVERSIDE AVE Address: Address: 601 RIVERSIDE AVE City-St-Zip: JACKSONVILLE, FL 32204 US City-St-Zip: JACKSONVILLE, FL 32204 US

I hereby certify that the information supplied with this filing does not qualify 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: MADELINE BAREWALD AVP 03/20/2009