# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 14, 2007**
**Secretary of State**

DOCUMENT# P26446

**Entity Name:** SOUTHERN TITLE INSURANCE CORPORATION

**Current Principal Place of Business:**

1051 E. CARY ST.
7TH FL.
RICHMOND, VA 23219 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 399
RICHMOND, VA 23218 US

**New Mailing Address:**

**FEI Number: 54-0483197** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

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

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

**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:**

| | | |
|---|---|---|
| Title: | DP | ( ) Delete |
| Name: | REEVES, DENNIS M | |
| Address: | 1051 E. CARY ST. 7TH FL. | |
| City-St-Zip: | RICHMOND, VA 23219 | |
| Title: | V | ( ) Delete |
| Name: | HARDWICK, WILLIAM J | |
| Address: | 915 MAIN ST 3RD FLOOR | |
| City-St-Zip: | LYNCHBURG, VA 24504 | |
| Title: | VSD | ( ) Delete |
| Name: | PURCELL, RIKER | |
| Address: | 1051 E. CARY ST. 7TH FL. | |
| City-St-Zip: | RICHMOND, VA 23219 | |
| Title: | V | ( ) Delete |
| Name: | BRIEL, MICHAEL E | |
| Address: | 305 HARRISON ST SE, SUITE 100 | |
| City-St-Zip: | LEESBURG, VA 20175 | |
| Title: | V | ( ) Delete |
| Name: | WILEY, JR., RONALD D | |
| Address: | 401 PARK ST | |
| City-St-Zip: | CHARLOTTESVILLE, VA 22901 | |
| Title: | T | ( ) Delete |
| Name: | BLANTON, ROBERT W JR | |
| Address: | 1051 E. CARY ST. 7TH FL. | |
| City-St-Zip: | RICHMOND, VA 23219 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |

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: ROBERT W BLANTON JR CFO 05/14/2007

Electronic Signature of Signing Officer or Director Date