

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26998

FILED
Apr 26, 2006
Secretary of State

Entity Name: FIRST TITLE CORPORATION (TN)

Current Principal Place of Business:

3237 SATELLITE BLVD. STE 450
DULUTH, GA 30096 US

New Principal Place of Business:

Current Mailing Address:

17911 VON KARMAN AVE., STE. 300
IRVINE, CA 92614 US

New Mailing Address:

FEI Number: 58-1719995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AUSTIN, RICHARD D
Address: 408 CEDAR BLUFF ROAD #140
City-St-Zip: KNOXVILLE, TN 37923

Title: DCEO () Delete
Name: QUIRK, RAYMOND R
Address: 601 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

Title: DCFO () Delete
Name: STINSON, ALAN L
Address: 601 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

Title: VPT () Delete
Name: FARENGA, PATRICK G
Address: 601 RIVERSIDE AVE.
City-St-Zip: JACKSONVILLE, FL 32204

Title: VPAS () Delete
Name: DUNLAP, PAMELA
Address: 3237 SATELLITE BLVD., STE 450
City-St-Zip: DULUTH, GA 30096

Title: SVPS () Delete
Name: JOHNSON, TODD C
Address: 601 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

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
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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 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: TODD C JOHNSON

SVPS

04/26/2006

Electronic Signature of Signing Officer or Director

Date