

1.) CORPORATION NAME: OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: KEVIN T POGODA 7960 DONEGAN DRIVE SUITE 247 MANASSAS, VA	DUE DATE: 3/31/2015 SCC ID NO: F0173452 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>6,000,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	6,000,000
CLASS	AUTHORIZED				
COMMON	6,000,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: MANASSAS CITY (FILED IN PRINCE WILLIAM COUNTY)					
4.) STATE OR COUNTRY OF INCORPORATION: MN					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 400 SECOND AVE SOUTH CITY/ST/ZIP: MINNEAPOLIS, MN 55401
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7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MARK BILBREY TITLE: PRESIDENT ADDRESS: 400 SECOND AVENUE SOUTH CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: MICHAEL T TARPEY TITLE: 1ST VP/T ADDRESS: 400 SECOND AVE S CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: DANIEL M WOLD TITLE: SVP/S ADDRESS: 400 SECOND AVENUE SOUTH CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: R K YEAGER TITLE: CEO ADDRESS: 400 SECOND AVENUE SOUTH CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55401-2499	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: CHRIS G. LIESER TITLE: SVP/CFO ADDRESS: 400 SECOND AVENUE SOUTH CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MARK BILBREY	MARK BILBREY, PRESIDENT	3/25/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.