

1.) CORPORATION NAME:

Westcor Land Title Insurance Company

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL CORPORATE RESEARCH, LTD.
250 BROWNS HILL COURT
MIDLOTHIAN, VA 23114**

SCC ID NO: **F1533357**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	16,666

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CHESTERFIELD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 201 N NEW YORK AVE
SUITE 200

CITY/ST/ZIP: WINTER PARK, FL 32789

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MARY O'DONNELL	
TITLE:	PRESIDENT	
ADDRESS:	201 N NEW YORK AVE STE 200	
CITY/ST/ZIP/CO:	WINTER PARK, FL 32789	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL SCHEFSTAD	
TITLE:	TREASURER	
ADDRESS:	201 N NEW YORK AVE STE 200	
CITY/ST/ZIP/CO:	WINTER PARK, FL 32789	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	PATRICIA W BOWER	
TITLE:	SECRETARY	
ADDRESS:	201 N NEW YORK AVE STE 200	
CITY/ST/ZIP/CO:	WINTER PARK, FL 32789	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID PHILIPP	
TITLE:	DIRECTOR	
ADDRESS:	189 FULWEILER AVE	
CITY/ST/ZIP/CO:	AUBURN, CA 95603	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TERRENCE L WRIGHT	
TITLE:	DIRECTOR	
ADDRESS:	2500 N BUFFALO DR STE 245	
CITY/ST/ZIP/CO:	LAS VEGAS, NV 89128	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Robbie D Graham	
TITLE:	DIRECTOR	
ADDRESS:	2500 North Buffalo Drive Suite 235	
CITY/ST/ZIP/CO:	Las Vegas, NV 89128	

NAME:	Roy W Lassiter	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	201 N. New York Ave		
	Suite 200		
CITY/ST/ZIP/CO:	Winter Park, FL 32789		

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/ MICHAEL SCHEFSTAD	MICHAEL SCHEFSTAD,	1/3/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREASURER	DATE
	PRINTED NAME AND CORPORATE TITLE	

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.