

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK * In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by

law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.						
1. Corporate ID No. 156645 2. Name of Corporation Home Title Guarantee Co.						
3 Street Address Principal Business Of One Home Loan Plaza			Gity Warwick	State RI	Ζίμ· 02886	
-1. Business Phone No. (800) 223-1700	,					
6 Brief Description of the Character of Business Conducted in Rhode Island Examines titles to real estate.						
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT) 🔲 FILL IN SPACES	S BEFORE USING ATTA	CHMENTS	
President Name Brian J. Murphy			Vice President Name			
Street Address One Home Loan Plaza			Street Addrass			
City Warwick	State RI	Ζір 02886	Сиу	State	Ζίρ	
Secretary Name Daniel A. Murphy			Treasurer Name Daniel A. Murphy			
Street Address One Home Loan Plaza			Street Address One Home Loan Plaza			
Warwick	State RI	21p 02886	City Warwick	State RI	^{Zip} 02886	
8. NAMES AND ADDRESSES	OF THE DIRECTORS	: ("X" BOX FOR ATT	ACHMENT) [FILL IN SPAC	ES BEFORE USING AT	TACHMENTS	
Director Name				Director Name		
Daniel A. Murphy Street Address			Brian J. Murphy Street Address			
						One Home Loan Plaza
City	State	Zip	Сйу	State	Zij)	
Warwick	RI	02886	Warwick	RI	02886	
Director Name			Director Name			
Street Address			Street Address			
City	State	Zip	Сцу	State	Ζίψ	
· · · · · · · · · · · · · · · · · · ·		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
	Common \$2	200 par value	5	Common	\$200 par value	
This report must be executed	on behalf of the corpo	oration by an authorize	d representative. If the corpora	ition is in the hands of a	receiver or trustee.	

this report must be executed on behalf of the corporation by the receiver or trustee.

FILED
File Date JAN 2 8 2009
Check No. By 3000215
By:
FOR SECRETARY OF STATE USE ONLY

Inder penalty of perjury, I declare and affirm that I have examined this report,	Under p
ncluding any accompanying schedules and statements, and that all statements	includin
ontained herein are true and correct.	
Domiel of Murphy 115/09	. \
ignature Date	Signature
7	7
Danid A. Murphy	\cup
Print or Type Name	Print or
-T-	
Measurer	1)
Title	Title