Fidelity National Title Group, Inc. Form 3 October 27, 2006 FORM 3 UNITED STAT

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Addres Person <u>*</u> THOMPSON	1	C	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol Fidelity National Title Group, Inc. [FNT]				
(Last) (Fi	irst) (N	Middle)	10/24/2006	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
601 RIVERSIDE	reet)		(Check all applicable) <u>X</u> Director 10% Ow Officer Other (give title below) (specify below)			Owner	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (St	ate)	(Zip)	Table I - I	Non-Derivat	ive Securiti	es Bei	neficially Owned	
1.Title of Security (Instr. 4)			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	1	
Common Stock			0		D	Â		
Reminder: Report on owned directly or inc	directly.		h class of securities benefic	5.	EC 1473 (7-02	)		
	informati required	on contai to respon	ond to the collection of ined in this form are no id unless the form disp IB control number.	t				
Table	II - Deriva	tive Securi	ities Beneficially Owned (a	e.g., puts, calls,	warrants, opt	ions, co	onvertible securities)	

1. Title of Derivative Security (Instr. 4)	Expiration D	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

OMB APPROVAL

3235-0104

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average burden hours per

Shares

(I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Addres	55	Relationships					
1.0		10% Owner	Officer	Other			
THOMPSON CARY H 601 RIVERSIDE AVENUE JACKSONVILLE, FL 322	X	Â	Â	Â			
Signatures							
Cary H. 10/ Thompson	/24/2006						
<u>**</u> Signature of Reporting Person	Date						

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.