

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 802639 (5)
1. Corporation Name
NATIONAL CASUALTY COMPANY

Principal Place of Business 8877 N. GAINES CENTER DRIVE SCOTTSDALE AR 85258 US	Mailing Address 8877 N. GAINES CENTER DRIVE SCOTTSDALE AR 85258 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/28/1925	
21		26		4. FEI Number 38-0865250	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State AZ		City & State AZ		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23	Zip	25	Country	28	Zip
24		29		30	

9. Name and Address of Current Registered Agent INSURANCE COMMISSIONER CAPITOL BLDG TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
FL		85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	R. MAX WILLIAMSON	1.2 NAME	
STREET ADDRESS	8877 NORTH GAINES CENTER DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SCOTTSDALE AZ	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCUTCHAN, GORDAN E.	2.2 NAME	VP/D McCutchan
STREET ADDRESS	2378 OXFORD ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBUS OH	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRUEN, WILLIAM S.	3.2 NAME	
STREET ADDRESS	25 EAST DESHLER AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBUS OH	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAKE, RAYMOND B.	4.2 NAME	
STREET ADDRESS	6307 MEMORIAL DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DUBLIN OH	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOONEY, DAVID P.	5.2 NAME	
STREET ADDRESS	ONE NATIONWIDE PLAZA	5.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBUS OH	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELALOYE, JOHN F.	6.2 NAME	
STREET ADDRESS	ONE NATIONWIDE PLAZA	6.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBUS OH	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *David P. Mooney* 1/28/98 602-948-0505

CR2E034 (10/97)

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NATIONAL CASUALTY COMPANY**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

TITLE	C/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Galen R. Barnes	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	
TITLE	C & CEO/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dimon R. McFerson	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	William S. Ramsden	
STREET ADDRESS	901 Tower Drive, Suite 400	
CITY-ST-ZIP	Troy, MI 48098	
TITLE	EVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert A. Oakley	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	
TITLE	EVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert J. Woodward, Jr.	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	J. Hoyt Blackhurst	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dennis W. Click	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David S. Dale	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Terri L. Hill	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael L. Horsman	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John I. Howarth	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert P. Keul	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Edwin P. McCausland, Jr.	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	

TITLE	VP/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael D. Miller	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John B. Probst, Jr.	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard J. Schmitzer	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James E. Schultz	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP H. George Surprenant 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gary L. Tiepelman 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Alan A. Todryk One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP John D. Zicarelli 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Christopher G. Behymer 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Warren D. Lueker 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Jean M. Nelson 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP/Controller Arlan G. Oliva 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Vijay A. Ramachandran 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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TITLE	AVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Steven E. Smith	
STREET ADDRESS	8877 N. Gainey Center Drive	
CITY-ST-ZIP	Scottsdale, AZ 85258	
TITLE	Asst. Treas.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Duane M. Campbell	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	
TITLE	Asst. Sec.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas W. Dietrich	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	
TITLE	Asst. Treas.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Peter J. Neckermann	
STREET ADDRESS	One Nationwide Plaza	
CITY-ST-ZIP	Columbus, OH 43216	