

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 APR 26 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

062577

DOCUMENT # 802639
1. Corporation Name
NATIONAL CASUALTY COMPANY

Principal Place of Business Mailing Address
8877 N. GAINES CENTER DRIVE 8877 N. GAINES CENTER DRIVE
SCOTTSDALE AZ 85258 SCOTTSDALE AZ 85258
US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date incorporated or Qualified
11/28/1925
4. FEI Number Applied For
38-0865250 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

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 re-issuing) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	R. MAX WILLIAMSON	
STREET ADDRESS	8877 NORTH GAINES CENTER DR.	
CITY-ST-ZIP	SCOTTSDALE AZ	
TITLE	VPO	<input checked="" type="checkbox"/> DELETE
NAME	MCCUTCHEAN	
STREET ADDRESS	2376 OXFORD ROAD	
CITY-ST-ZIP	COLUMBUS OH	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	DRUEN, WILLIAM S.	
STREET ADDRESS	25 EAST DESHLER AVENUE	
CITY-ST-ZIP	COLUMBUS OH	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	BLAKE, RAYMOND B.	
STREET ADDRESS	6307 MEMORIAL DRIVE	
CITY-ST-ZIP	DUBLIN OH	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	DELALOYE, JOHN F.	
STREET ADDRESS	ONE NATIONWIDE PLAZA	
CITY-ST-ZIP	COLUMBUS OH	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	0100002856630
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	04/23/99
2.3 STREET ADDRESS	****150.00 ****150.00
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	VP/D
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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, with all other like empowered.

SIGNATURE: Blackhurst 1/26/99 (602) 948-0505
DATE: _____ DAYLINE PHONE: _____

002577 (1/99)

24
8

2

1999 PROFIT CORPORATION ANNUAL REPORT NATIONAL CASUALTY COMPANY		
12. OFFICERS AND DIRECTORS (cont'd.)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D Galen R. Barnes One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C & CEO/D Dimon R. McFerson One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William S. Ransden 901 Tower Drive, Suite 400 Troy, MI 48098	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Robert A. Oakley One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Robert J. Woodward, Jr. One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP Edwin P. McCausland, Jr. One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP J. Hoyt Blackhurst 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Raymond B. Blake One Nationwide Plaza Columbus, OH 43216	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S Dennis W. Click One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP David S. Dale 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Terri L. Hill 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete

244

3

1999 PROFIT CORPORATION ANNUAL REPORT NATIONAL CASUALTY COMPANY		
12. OFFICERS AND DIRECTORS (cont'd.)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Michael L. Horsman 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP John I. Howarth One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Robert P. Keul 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/T Michael D. Miller 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP John B. Probet, Jr. 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Richard J. Schmitzer 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP James E. Schultz One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP H. George Surprenant 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gary L. Tjepelman 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Alan A. Todryk One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP John D. Zicarelli 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete

. 940
81

1999 PROFIT CORPORATION ANNUAL REPORT
NATIONAL CASUALTY COMPANY

4

12. OFFICERS AND DIRECTORS (cont'd.)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Christopher G. Behymer 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Warren D. Lueker 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Jean M. Nelson 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP/Controller Arlan G. Oliva 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Vijay A. Ramachandran 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Steven E. Smith 8877 N. Gainey Center Drive Scottsdale, AZ 85258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Treas. Duane M. Campbell One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Sec. Thomas W. Dietrich One Nationwide Plaza Columbus, OH 43216	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Treas. Peter J. Neckermann One Nationwide Plaza Columbus, OH 43216	<input checked="" type="checkbox"/> Delete

450
800

5

1999 PROFIT CORPORATION ANNUAL REPORT NATIONAL CASUALTY COMPANY	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition David J. Kauchek 8877 N. Gainey Center Drive Scottsdale, AZ 85258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Joseph A. Lughca, Jr. 8877 N. Gainey Center Drive Scottsdale, AZ 85258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Doreen K. Reirke 8877 N. Gainey Center Drive Scottsdale, AZ 85258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Susan F. Wain 8877 N. Gainey Center Drive Scottsdale, AZ 85258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	