

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 810578

1. Entity Name

NATIONWIDE MUTUAL FIRE INSURANCE COMPANY

Principal Place of Business

Mailing Address

ONE NATIONWIDE PLAZA  
COLUMBUS OH 43216  
US

ONE NATIONWIDE PLAZA  
COLUMBUS OH 43215-2220  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 31-4177110

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLORIDA INSURANCE COMMISSONER  
CAPITOL BUILDING  
TALLAHASSEE FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C ☐ Delete  
NAME MCFERSON, DIMON R  
STREET ADDRESS ONE NATIONWIDE PLAZA  
CITY-ST-ZIP COLUMBUS, OH 00000 43216

TITLE C/D ☒ Change ☐ Addition  
NAME McFerson, Dimon R.  
STREET ADDRESS One Nationwide Plaza  
CITY-ST-ZIP Columbus, Ohio 43216

TITLE P ☐ Delete  
NAME BARNES, GALEN R  
STREET ADDRESS ONE NATIONWIDE PLAZA  
CITY-ST-ZIP COLUMBUS OH 43216

TITLE P/D ☒ Change ☐ Addition  
NAME Barnes, Galen R.  
STREET ADDRESS One Nationwide Plaza  
CITY-ST-ZIP Columbus, Ohio 43216

TITLE VS ☐ Delete  
NAME CLICK, DENNIS W  
STREET ADDRESS ONE NATIONWIDE PLAZA  
CITY-ST-ZIP COLUMBUS, OH 00000 43216

TITLE V ☒ Change ☐ Addition  
NAME Click, Dennis W.  
STREET ADDRESS One Nationwide Plaza  
CITY-ST-ZIP Columbus, Ohio 43216

TITLE VT ☐ Delete  
NAME CAMPBELL, DUANE M  
STREET ADDRESS ONE NATIONWIDE PLAZA  
CITY-ST-ZIP COLUMBUS, OH 00000 43216

TITLE SV/S ☐ Change ☒ Addition  
NAME Hatler, Patricia R.  
STREET ADDRESS One Nationwide Plaza  
CITY-ST-ZIP Columbus, Ohio 43216

TITLE V ☐ Delete  
NAME DIETRICH, THOMAS W  
STREET ADDRESS ONE NATIONWIDE PLAZA  
CITY-ST-ZIP COLUMBUS OH 43216

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas W. Dietrich 04/27/00

Date

(614) 249-7638

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)