


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

FILED
Feb 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # 811071 (0)

1. Corporation Name
BANKERS STANDARD FIRE AND MARINE COMPANY



Principal Place of Business P.O. BOX 7716 PHILADELPHIA PA 19192-2221	Mailing Address P.O. BOX 7716 PHILADELPHIA PA 19192-2221
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1601 Chestnut Street Suite, Apt. #, etc.		2a. Mailing Address 26 1601 Chestnut Street Suite, Apt. #, etc.		3. Date Incorporated or Qualified 05/31/1956	
22 City & State 23 Philadelphia, PA		27 TL21G City & State 28 Philadelphia, PA		4. FEI Number 75-6014863	
24 19192 Zip		29 19192 Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country		30 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent INSURANCE COMMISSIONER THE CAPITOL 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	85 Zip Code FL

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANKLIN, RICHARD C	1.2 NAME	
STREET ADDRESS	1601 CHESTNUT STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA 19192	1.4 CITY-ST-ZIP	
TITLE	CD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISOM, GERALD A	2.2 NAME	
STREET ADDRESS	1601 CHESTNUT ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULLIGAN, GEORGE D	3.2 NAME	
STREET ADDRESS	1601 CHESTNUT ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	3.4 CITY-ST-ZIP	
TITLE	SVPD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRUSKO, GERALDINE F	4.2 NAME	
STREET ADDRESS	1601 CHESTNUT STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA 19192	4.4 CITY-ST-ZIP	
TITLE	VAT <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERGSTEINSSON, PAUL	5.2 NAME	
STREET ADDRESS	1601 CHESTNUT STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	5.4 CITY-ST-ZIP	
TITLE	VT <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARRETT, KENNETH R	6.2 NAME	
STREET ADDRESS	1601 CHESTNUT ST.	6.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	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.

CR2E034 (10/97)