

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

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90203 037 ***150.00

05-43046

PROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # 811071

1. Corporation Name
BANKERS STANDARD FIRE AND MARINE COMPANY



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**1601 CHESTNUT ST
 PHILADELPHIA PA 19192
 US**

Mailing Address
**1601 CHESTNUT ST
 TL21G
 PHILADELPHIA PA 19192
 US**

3. Date Incorporated or Qualified
05/31/1956

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip Country
 24 25

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip Country
 29 30

4. FEI Number
75-6014863

Applied For
 Yes 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
 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 **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	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	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	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	4.1 TITLE	<input checked="" 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	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	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	

VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: George D. Mulligan **SIGNATURE REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
George D. Mulligan, Corporate Secretary

4-13-99 215-761-2907
 Date Daytime Phone #

CR2E034 (11/98)