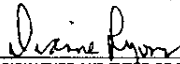


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90180 041 ***150.00

DOCUMENT # 811199 1. Entity Name UNITED FIRE & INDEMNITY COMPANY					
Principal Place of Business 2115 WINNIE P. O. BOX 1259 GALVESTON, TX 77550			Mailing Address 118 SECOND AVE SE CEDAR RAPIDS, IA 52407		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number 74-6045664				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCCALL, RALPH D 1602 WILDCAT CT WINTER SPRINGS, FL 32708			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEINSHEIMER, JF III 2115 WINNIE GALVESTON, TX 77550	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MCINTYRE, JR, JOHN SCOTT 118 SECOND AVE SE CEDAR RAPIDS, IA 52407	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIFE, JOHN ARTHUR 118 SECOND AVE SE CEDAR RAPIDS, IA 52407	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LOHEC, HELEN K 7606 BEAUDELAIRE GALVESTON, TX 77551	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BAKER, KENT G 118 SECOND AVENUE SE CEDAR RAPIDS, IA 52407	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP SWAIN, RICHARD B 2115 WINNIE GALVESTON, TX 77550	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Dianne Lyons		April 7, 2006 (319)399-5723	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	