

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

FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 811284 (9)
 1. Corporation Name
GENERAL ACCIDENT INSURANCE COMPANY OF AMERICA



Principal Place of Business 436 WALNUT STREET PHILADELPHIA PA 19106-3703	Mailing Address 436 WALNUT STREET PHILADELPHIA PA 19106-3703
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 09/06/1956	3a. Date of Last Report 02/14/1996
4. FEI Number 23-1502700	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent SMITH, EILEEN S 2601 WESTHALL LANE MAITLAND FL 32751	10. Name and Address of New Registered Agent 81 Name Elizabeth Bowden 82 Street Address (P.O. Box Number is Not Acceptable) 2601 Westhall Lane 83 84 City Maitland
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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 *Elizabeth Bowden* **Elizabeth Bowden** **4/9/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	C <input type="checkbox"/> DELETE
NAME	FARNAM, WALTER E.
STREET ADDRESS	436 WALNUT STREET
CITY-ST-ZIP	PHILADELPHIA PA
TITLE	VT <input type="checkbox"/> DELETE
NAME	NAUGHTON, JOHN J.
STREET ADDRESS	436 WALNUT STREET
CITY-ST-ZIP	PHILADELPHIA PA
TITLE	S <input type="checkbox"/> DELETE
NAME	DYEN, RANDALL E
STREET ADDRESS	436 WALNUT STREET
CITY-ST-ZIP	PHILADELPHIA PA
TITLE	D <input type="checkbox"/> DELETE
NAME	BUTLER, GEORGE A.
STREET ADDRESS	717 ST. ANDREW RD.
CITY-ST-ZIP	PHILADELPHIA PA
TITLE	PD <input type="checkbox"/> DELETE
NAME	COYNE, FRANCIS J
STREET ADDRESS	436 WALNUT STREET
CITY-ST-ZIP	PHILADELPHIA PA
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	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
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 type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
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 do 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.

SIGNATURE: *Randall E. D.* **4/14/97** **6157625-4293**

CR2E034 (9/96)