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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

815245

(6)

AMERICAN STATES INSURANCE COMPANY

Principal Place of Business

Mailing Address

500 NORTH MERIDIAN STREET INDIANAPOLIS INDIANA 46204

500 NORTH MERIDIAN STREET INDIANAPOLIS INDIANA 46204

FILED Jan 25, 1996 08:00 AM **Secretary of State**



A No man				· · · · · · · · · · · · · · · · · · ·	3. Date Incorporated or Qualified 05/01/1961	3a. Date of Last 01/26/1	
- 2. Principal I 21	Place of Business	2a. Mailing Address 26			4. FEI Number 35-0145400		Applied For
Suite, Apt	t #, etc.	Suite, Apt. #, etc).		5. Certificate of Status Desired		Not Applicable 5 Additional Required
City & Sta	de	City & State			Election Campaign Financing Trust Fund Contribution	□ \$5.0	00 May Be ed to Fees
Z _(F)	Country 25	Ζιρ 29	Cour 30	itry	8. This corporation has liability for in Florida Statutes Yes	itangible tax under	
	Name and Address of Currer	nt Registered Agent			10. Name and Address of New Re		
				B1 Name			
THE INSURANCE COMMISSIONER				B2 Stree	et Address (P.O. Box Number is Not Acceptable)		
THE CAPITOL BUILDING			Ĺ			21	
IALLA	AHASSEE FL 32304		[+	83			
			ļ.	B4 City		85 4	no Code
11 Parsuant	t to the provisions of Sections 607.0503	and 607 1509 Decide Co	20.402.455		corporation submits this statement for the purp	FL ``	
familiar v	ered agent, or both, in the State of Florion with, and accept the obligations of, Sect			orporation'	corporation submits this statement for the purp is board of directors. I hereby accept the appoil	intment as registere	d agent. I am
SIGNATURE	Skirwhare, typerflor printed harte of registered agent	and little if applicable	NOTE Registered A	aent sanature	required when reinstating)	DATE	
2.	OFFICERS AN		13.	gran organization	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
PLF	PD	☐ DELETE	1 1 101	LE	C/D	★★ Change	
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	INDIANAPOLIS IN	····		r-ST-ZIP		}	
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TEE AM- OBSELLADORESS	VD Barthel, F. Ernest 1756 Glencary Crest	X3 EDECETE	1.4 C/T1 2 1 TITI 2.2 NAM	LF.	INDIANAPOLIS, IN 46208 V/T/D STEPHENSON, TODD R.		Addition
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TEE AM- BEEL ADDRESS (LY-SE ZIP ILLE AME "BEEL ADDRESS	VD BARTHEL, F. ERNEST 1756 GLENCARY CREST GREENWOOD IN VGC OBER, THOMAS M 5262 N CENTRAL AVE		1.4 C/T) 2.1 TIT 2.2 NAA 2.3 STR 2.4 C/T) 3.1 T/T] 3.2 NAA 3.3 STR	EET ADDRESS (*-ST-ZIP LE (EET ADDRESS	INDIANAPOLIS, IN 46208 V/T/D STEPHENSON, TODD R. 8924 STORMHAVEN COURT INDIANAPOLIS, IN 46256	☐ Change	
TEF AM- DREFLADORESS (FY-SL-ZIP ULE AME DREFLADORESS FLY-SL-ZIP	VD BARTHEL, F. ERNEST 1756 GLENCARY CREST GREENWOOD IN VGC OBER, THOMAS M	☐ DELETE	1.4 C/T) 2.1 TIT 2.2 NAM 2.3 STR 2.4 C/T) 3.1 T/T] 3.2 NAM 3.3 STF 3.4 C/T)	LE AEE1 ADDRESS T-ST-ZIP LE RE REFT ADDRESS T-ST-ZIP	INDIANAPOLIS, IN 46208 V/T/D STEPHENSON, TODD R. 8924 STORMHAVEN COURT INDIANAPOLIS, IN 46256	☐ Change	☐ Addition
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ritify 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 the information of the corporation or the corporation of the corporation of the corporation or the corporation of t oath; that I am an officer or director of the corporation or the appears in Block 12 or any 33 if changed, or on an attach.

SIGNATURE:

THOMAS M. OBER, SECRETARY 1/18/96 (317) 262-6797