

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 # **818752** (8)  
1. Corporation Name  
**PENNSYLVANIA GENERAL INSURANCE COMPANY**



Principal Place of Business <b>436 WALNUT STREET PHILADELPHIA PA 19106-3703</b>	Mailing Address <b>436 WALNUT STREET PHILADELPHIA PA 19106-3703</b>
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3. Date Incorporated or Qualified <b>09/24/1956</b>	3a. Date of Last Report <b>04/24/1996</b>
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2. Principal Place of Business		2b. Mailing Address		4. FEI Number <b>23-1471444</b>		Applied For <input type="checkbox"/> Not Applicable	
21	Suite, Apt. #, etc.		26	Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
22	City & State		27	City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
23	Zip	Country	28	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	25	29	30				

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 <b>Elizabeth Bowden</b>	85 Zip Code <b>32751</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>2601 Westhall Lane</b>	
83	
84 City <b>Maitland</b>	85 State <b>FL</b>

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)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>C</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FARNAM, WALTER E.</b>	1.2 NAME	
STREET ADDRESS	<b>436 WALNUT STREET</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PHILADELPHIA PA</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VT</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NAUGHTON, JOHN J.</b>	2.2 NAME	
STREET ADDRESS	<b>436 WALNUT STREET</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PHILADELPHIA PA</b>	2.4 CITY-ST-ZIP	
TITLE	<b>PD</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>COYNE, FRANK J.</b>	3.2 NAME	
STREET ADDRESS	<b>436 WALNUT STREET</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PHILADELPHIA PA</b>	3.4 CITY-ST-ZIP	
TITLE	<b>D</b>	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CORCORAN, J. C.</b>	4.2 NAME	<b>Major, Jr., Laurence H.</b>
STREET ADDRESS	<b>436 WALNUT STREET</b>	4.3 STREET ADDRESS	<b>436 Walnut Street</b>
CITY-ST-ZIP	<b>PHILADELPHIA PA</b>	4.4 CITY-ST-ZIP	<b>Philadelphia, PA</b>
TITLE	<b>S</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DYEN, RANDALL E</b>	5.2 NAME	
STREET ADDRESS	<b>436 WALNUT STREET</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PHILADELPHIA PA</b>	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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. Dye* **Randall E. Dye** **4/14/97** **(615) 605-4293**

CR2E034 (9/96)