

2004 FOR PROFIT CORPORATION ANNUAL REPORT


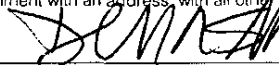
FILED
Mar 30, 2004 8:00 am
Secretary of State

03-30-2004 90009 015 ***150.00

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02022004 Chg-P CR2E034 (10/03)

DOCUMENT # 818752					
1. Entity Name PENNSYLVANIA GENERAL INSURANCE COMPANY					
Principal Place of Business 436 WALNUT STREET PHILADELPHIA, PA 19106-3703			Mailing Address ONE BEACON STREET BOSTON, MA 02108		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 23-1471444	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000			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) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	S	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, DENNIS R		NAME	Singer, Roger M.	
STREET ADDRESS	ONE BEACON STREET		STREET ADDRESS	One Beacon St.	
CITY-ST-ZIP	BOSTON, MA		CITY-ST-ZIP	Boston, MA 02108	
TITLE	DP	<input type="checkbox"/> Delete	TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CAVOORES, JOHN P		NAME	Galeaz, Gregory R.	
STREET ADDRESS	ONE BEACON STREET		STREET ADDRESS	One Beacon St.	
CITY-ST-ZIP	BOSTON, MA 02108		CITY-ST-ZIP	Boston, MA 02108	
TITLE	DCCA	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHOYEL, CHARLES B		NAME	Chokel, Charles B.	
STREET ADDRESS	ONE BEACON STREET		STREET ADDRESS	One Beacon St.	
CITY-ST-ZIP	BOSTON, MA 02108		CITY-ST-ZIP	Boston, MA 02108	
TITLE	DVP	<input type="checkbox"/> Delete	TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARCHIMEDES, ALEX C		NAME	Archimedes, Alex C.	
STREET ADDRESS	ONE BEACON STREET		STREET ADDRESS	One Beacon St.	
CITY-ST-ZIP	BOSTON, MA 02108		CITY-ST-ZIP	Boston, MA 02108	
TITLE	DVP	<input type="checkbox"/> Delete	TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORNESE, ANDREW C		NAME	Carnase, Andrew C.	
STREET ADDRESS	ONE BEACON ST		STREET ADDRESS	One Beacon St.	
CITY-ST-ZIP	BOSTON, MA 02108		CITY-ST-ZIP	Boston, MA 02108	
TITLE	DVP	<input type="checkbox"/> Delete	TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, MORGAN W		NAME	Davis, Morgan W	
STREET ADDRESS	ONE BEACON ST		STREET ADDRESS	One Beacon St.	
CITY-ST-ZIP	BOSTON, MA 02108		CITY-ST-ZIP	Boston, MA 02108	
12. 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 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: 		Dennis R. Smith		1/30/04 617-725-6000	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone *	

Attachment

818752

Officers/Directors List

VD

Howard, Richard P.
One Beacon Street
Boston, MA 02108

VD

Lerwick, Stuart N.
One Beacon Street
Boston, MA 02108

VD

Schmitt, Thomas N.
One Beacon Street
Boston, MA 02108

T

Winn, Gregory P.
One Beacon Street
Boston, MA 02108