

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004854

FILED
Jan 15, 2009
Secretary of State

Entity Name: REPUBLIC INDEMNITY COMPANY OF CALIFORNIA

Current Principal Place of Business:

15821 VENTURA BLVD.
SUITE 370
ENCINO, CA 91436

New Principal Place of Business:

Current Mailing Address:

15821 VENTURA BLVD.
SUITE 370
ENCINO, CA 91436

New Mailing Address:

FEI Number: 31-1054123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEPT OF FINANCIAL SERVICES
200 E. GAINES STREET
LARSON BUILDING
TALLAHASSEE, FL 323990300 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: GRUBER, GARY J
Address: 15821 VENTURA BLVD. #370
City-St-Zip: ENCINO, CA 91436

Title: VD () Delete
Name: HARKINS, DAVID
Address: 15821 VENTURA BLVD. #370
City-St-Zip: ENCINO, CA 91436

Title: VCFO () Delete
Name: RILEY, DION G
Address: 15821 VENTURA BLVD.
City-St-Zip: ENCINO, CA 91436

Title: TD () Delete
Name: RILEY, DION G
Address: 15821 VENTURA BLVD.
City-St-Zip: ENCINO, CA 91436

Title: PCEO () Delete
Name: MARIONI, DWAYNE T
Address: 15821 VENTURA BLVD.
City-St-Zip: ENCINO, CA 91436

Title: D () Delete
Name: MARIONI, DWAYNE T
Address: 15821 VENTURA BLVD.
City-St-Zip: ENCINO, CA 91436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DION G. RILEY

VCFO

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date