

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90093 026 ***150.00

DOCUMENT # F94000003872
 1. Entity Name
STRUCTURED SECURITY COMPANY, INC.

Principal Place of Business 777 SAN MARIN DR. % CORP SECRETARY'S OFFICE NOVATO CA 94998 US	Mailing Address 777 SAN MARIN DR. % CORP SECRETARY'S OFFICE NOVATO CA 94998 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 13-2642442	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KUSHNER, BETSY L
 FIREMAN'S FUND INSURANCE COMPANIES
 4301 ANCHOR PLAZA PARKWAY
 TAMPA FL 33634**

7. Name and Address of New Registered Agent

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HANSMEYER, HERBERT F 777 SAN MARIN DR. NOVATO CA 94998 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P POST, JEFFREY H 777 SAN MARIN DR. NOVATO CA 94998 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO POST, JEFFREY H 777 SAN MARIN DR. NOVATO CA 94998 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT MARSH, HAROLD N III 777 SAN MARIN DR. NOVATO CA 94998 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV KLOENHAMER, JANET S 777 SAN MARIN DR. NOVATO CA 94998 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WONG, JEANNETTE Y 777 SAN MARIN DR. NOVATO CA 94998 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Julie A. Garrison 777 San Marin Drive Novato CA 94998 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/C/P/CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Julie A. Garrison **REQUIRED** **03/13/02 (415) 899-2000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

attachment # F 94 00000 3872 / 011825

STRUCTURED SECURITY COMPANY, INC.
(Subsidiary of Fireman's Fund Insurance Company)
(formerly known as International Holding Corporation)

PURPOSE: To engage in the business of structured settlements.

DIRECTORS

Peter Huehne
H. David Lundgren

Jeffrey H. Post

ELECTED OFFICERS

Jeffrey H. Post

Chairman of the Board, President
and Chief Executive Officer

Peter Huehne

Executive Vice President and
Chief Financial Officer

Janet S. Kloenhamer

Senior Vice President, General
Counsel and Corporate Secretary

Harold N. Marsh, III

Senior Vice President and
Treasurer

APPOINTED OFFICERS

Julie A. Garrison

Assistant Secretary

Business address:

All of the above are located at 777 San Marin Drive, Novato,
California, 94998.

Home office address:

32 Loockerman Sq., Suite L-100,
Dover DE 19901