2005 FOR PROFIT CORPORATION

FILED Apr 28, 2005 8:00 am Secretary of State

ANNUAL REPORT							Secretary of State				
DOCUMENT # F9700003554 1. Entity Name THE EXPLORER INSURANCE COMPANY							04-28-2005	90209 ()50 ***150.	00	
Principal Place	e of Business	Mailing Address	Mailing Address								
PO BOX 85563 San Diego, ca 92186-5563		PO BOX 85563 San Diego, Ca 92186-5563				14006051					
							<u> </u>		i		
2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				04152005	Chg-P	CR2	E034 (10/03)		
City & State	e	City & State				4. FEI Numb 94-278			 	plied For t Applicable	
Zip	Country	Zip	Zip Count			5. Certificate of Status Desired S8.75 Additional Fee Required					
	8. Name and Address of Curren	7. Name and Address of New Registered Agent									
CHIEF FINANCIAL OFFICER					Name						
	3200 (32314-6200)					.O. Box Numb	er is Not Acceptab	le)			
200 E. GAI TALLAHAS					· · · · · · · · · · · · · · · · · · ·						
17.227.17.0	3022,12 02000		City					F	Zip Code)	
8. The above	named entity submits this statement	for the nurnose of changing it	s register	ed office or re	enistere	nd agent or bo	th In the State of F	•	- ,	and accent	
the obligat	ions of registered agent.	parpass an anna 1 9 9			o grator a	o agona, or ac	on, in the orace of t	101104. 14		ana accopt	
SIGNATURE_	Signature, typed or printed name of registered age	nt and title if applicable. (NC	TE: Registere	d Agent signature	e required v	when reinstations)		DATI			
					,	······································	I				
FILE NOW!!! FEE IS \$150.00 9. Election Camp After May 1, 2005 Fee will be \$550.00 Trust Fund Co				ncing		00 May Be d to Fees					
10.	OFFICERS AN	D DIRECTORS	11.			ADDITIONS	I /CHANGES TO OF	FICERS A	ND DIRECTORS	3 IN 11	
TITLE .	D	☐ Delete	TITL						☐ Change	☐ Addition	
NAME	FELDMAN, BERNARD M		NAM								
STREET ADDRESS			EET ADDRESS								
CITY-ST-ZIP			-ST-ZIP								
TITLE NAME	HANNUM, JOHN L	☐ Delets	, titl	1					☐ Change	Addition	
STREET ADDRESS	11455 EL CAMINO REAL			EET ADDRESS							
CITY-ST-ZIP	SAN DIEGO, CA 921302045			-ST-ZIP							
TITLE	S CANINON MARY E	☐ Delete	TITU						☐ Change	☐ Addition	
STREET ADDRESS	11455 EL CAMINO REAL	·	— — NAM STRI	EET ADORESS			·				
CITY-ST-ZIP	SAN DIEGO, CA 921302045			'-ST-ZIP		<u> </u>					
TITLE	T	☐ Delete	πu						Change	Addition	
NAME STREET ADDRESS	FREET, H M		NAM								
CITY-ST-ZIP	11455 EL CAMINO REAL SAN DIEGO, CA 921302045			EET ADDRESS (-ST-ZIP							
TITLE	P	Delete	ווות		Pre	sident			Change Ch	☐ Addition	
NAME	RADY, ERNEST S		NAM				ael Prior amino Real	-	ولاستان ت		
STREET ADDRESS	11455 EL CAMINO REAL		STRE	EET ADDRESS				L			
CITY-ST-ZIP	SAN DIEGO, CA 92130		CITY	-ST-ZIP	San	Diego,	CA 92130				
TITLE NAME	D AUSTIN, JAMES W III	☐ Delete	TITL!	1			· ———		Change	Addition	

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 received 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 lother like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

11455 EL CAMINO REAL

SAN DIEGO, CA 921302045

Rul August And Typed on Printed Name of Skining officer on Director

04/15/05

858-350-2400

Daytime Phone #