

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90068 028 ***150.00

DOCUMENT # F99000004848

1. Entity Name
MERIDIAN CITIZENS MUTUAL INSURANCE COMPANY

Principal Place of Business P.O. BOX 1980 INDIANAPOLIS IN 46206	Mailing Address P.O. BOX 1980 INDIANAPOLIS IN 46206-1980
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 41-0190580	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		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 _____ (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, 2000 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OMAN, NORMA JEAN 2955 NORTH MERIDIAN STREET INDIANAPOLIS IN 46208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joel E. Brown 2955 N. Meridian St., Indpls., IN 46208 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS MCKINZIE, JOHN MARK 2955 NORTH MERIDIAN STREET INDIANAPOLIS IN 46208 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition See attached for complete listing
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BUEDEL, CARL WILLIAM 2955 NORTH MERIDIAN STREET INDIANAPOLIS IN 46208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HANRAHAN, TIMOTHY J 2955 N. MERIDIAN STREET INDIANAPOLIS IN 46208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT HAZELBAKER, STEVEN RAY 2955 NORTH MERIDIAN STREET INDIANAPOLIS IN 46208 <input type="checkbox"/> Delete	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"/> Delete	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: Susan Rowron-White Date: 4-13-00 Daytime Phone #: 317-931-7213
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Susan Rowron-White, Asst. Secretary

CR2E034 (9/99)

Attachment 00074246
F99 000004848

**BOARD OF DIRECTORS
OF
MERIDIAN CITIZENS MUTUAL INSURANCE COMPANY**

**Norma Jean Oman, Chairman of the Board
Meridian Insurance Group, Inc.
2955 North Meridian Street
Indianapolis, Indiana 46208**

**Timothy James Hanrahan
Meridian Insurance Group, Inc.
2955 North Meridian Street
Indianapolis, Indiana 46208**

**Carl William Buedel
Meridian Insurance Group, Inc.
2955 North Meridian Street
Indianapolis, Indiana 46208**

**Joel E. Brown
Meridian Insurance Group, Inc.
2955 North Meridian Street
Indianapolis, Indiana 46208**

**Steven Ray Hazelbaker
Meridian Insurance Group, Inc.
2955 North Meridian Street
Indianapolis, Indiana 46208**

OFFICERS:

Norma Jean Oman	President & Chairman of the Board
Carl William Buedel	Senior Vice President
Timothy James Hanrahan	Senior Vice President
Steven Ray Hazelbaker	Vice President, Chief Financial Officer & Treasurer
William Clayton Paumen	Vice President
Susan Bowron-White	Assistant Secretary

(all addresses: 2955 North Meridian Street, Indianapolis, Indiana, 46208)