


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91031 035 ***150.00

DOCUMENT # P06971
 1. Entity Name
NATIONWIDE INSURANCE COMPANY OF AMERICA




Principal Place of Business Mailing Address
1100 LOCUST STREET **1100 LOCUST STREET**
DES MOINES, IA 50391-2000 US **DES MOINES, IA 50391-2000 US**

2. Principal Place of Business 3. Mailing Address
1100 LOCUST STREET **1100 LOCUST STREET**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
DES MOINES, IA **DES MOINES, IA**

Zip Country Zip Country
50391-1100 **USA** **50391-1100** **USA**

44037366



03242004 Chg-P CR2E034 (10/03)
 4. FEI Number **95-2130882** Applied For Not Applicable
 5. Certificate of Status Desired **\$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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HOLLINGSWORTH, DAVID ONE NATIONWIDE PLAZA COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P / D WALKER, KIRT A 1100 LOCUST STREET DES MOINES, IA 50391-1100 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BARNES, GALEN R ONE NATIONWIDE PLAZA COLUMBUS, OH 43216 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V / D GREENSTEIN, J LYNN ONE NATIONWIDE PLAZA COLUMBUS, OH 43215 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS PARSONS, ROBERT M 1100 LOCUST STREET DES MOINES, IA 50391 <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	S SODEN, GLENN W ONE NATIONWIDE PLAZA COLUMBUS, OH 43215 <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	VT BUTLER, LYNDAM 1100 LOCUST STREET DES MOINES, IA 503912000 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V / T CROSSER, WENDELL P. 1100 LOCUST STREET DES MOINES, IA 50391-1100 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RASMUSSEN, STEPHEN S 1100 LOCUST STREET DES MOINES, IA 503912000 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C / D RASMUSSEN, STEPHEN S ONE NATIONWIDE PLAZA COLUMBUS, OH 43215 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 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: *Robert M. Parsons* **Robert M. Parsons, Vice President-**
Assoc General Counsel & Asst Secy **4/20/04** **515-508-4445**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

44037366

P06971

Nationwide Insurance Company of America Officers:

Officers (continued)

Located at One Nationwide Plaza, Columbus, OH 43215

Patricia R. Hatler, Executive Vice President and General Counsel
Terri L. Hill, Executive Vice President-Chief Administrative Officer
Robert A. Rosholt, Executive Vice President-Chief Finance and Investment Officer
David R. Jahn, Senior Vice President-Property and Casualty Claims
Thomas E. Barnes, Vice President and Assistant Secretary
Alan A. Todryk, Vice President-Taxation

Located at 1100 Locust Street, Des Moines, IA 50391-1100

~~W. Kim Austen, Senior Vice President-Property and Casualty Commercial/Farm Product Pricing
Robert H. Brodersen, Vice President-Personal Lines Underwriting
James R. Burke, Vice President-Operations
Daniel D. Ellett, Vice President-Compliance and Customer Relations
James J. Hagenbucher, Vice President-Marketing
Susan J. McGinness, Vice President-Human Resources
Douglas R. Pearson, Vice President-Commercial Lines Underwriting
Larry W. Phillips, Vice President-Commercial Lines Marketing
Maury L. Reding, Vice President-Property and Casualty Claims
Scott M. Schoenborn, Vice President-Agricultural Underwriting~~

Located at 70 West Michigan Avenue, Battlecreek, MI 49017

Ralph F. Krause, Jr., Vice President-Regional Operations

Directors (continued)

Located at One Nationwide Plaza, Columbus, OH 43215

~~Kelly A. Hamilton
David R. Jahn
Gale V. King
George N. McKinnon
Douglas C. Robinette
Richard M. Waggoner~~