2005 FOR PROFIT CORPORATION

ANNUAL REPORT

07-15-2005 90022 043 ***150 00 DOCUMENT # P07294 UNITED CASUALTY INSURANCE COMPANY OF **AMERICA** Principal Place of Business Mailing Address 20064208 231 W. LOCKWOOD AVE ONE EAST WACKER DRIVE WEBSTER GROVES, MO 63119 1313 CHICAGO, IL 60601 3. Mailing Address 2. Principal Place of Business 12115 Lacklan Suite, Apt. #, etc. Suite Act # etc 07062005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For M٥ ouis 23-1614367 Not Applicable Zip Country \$8.75 Additional ILS A 5. Certificate of Status Desired 63146 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Rogistored Agent Name **CHIEF FINANCIAL OFFICER** Street Address (P.O. Box Number is Not Acceptable) P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 City 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Due by September 7, 2005 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE ☐ Delete Change Addition NAME DRAUT ERIC J NAME STREET ADDRESS ONE EAST WACKER DR STREET ADDRESS CITY-ST-ZIP CHIAGO, IL 60601 CITY-ST-ZIP ☐ Delete mr TITLE ☐ Addition MYERS, THOMAS DAVID NAME NAME 12115 Lackland Rd ONE EAST WACHER DRIVE STREET ADORESS STREET ADDRESS CHICAGO, IL 60601 CITY-ST-ZIP CITY-ST-ZIP Louis MO vs Delete tme TITLE ☐ Change Addition (Camillo, John R. 12115 Lackland Rd. 5t. Louis MO 631 GRIDER, PATRICIA G NAME HALLE STREET ADDRESS ONE EAST WACKER DRIVE STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60601 CITY-ST-ZIP Louis, mo 63146

12. I hereby certily 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.

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST- ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

NAME

ITTE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP -

STREET ADDRESS

City-ST-ZIP

CITY-ST-ZIP TITLE

COLLINS, JAMES J

CHICAGO, IL 60601

BENGSTON, DAVID F

CHICAGO, IL 60601

231 W LOCKWOOD AVE

WEBSTER GROVES, MO 63119

SOUTHWELL, DONALD GENE

ONE EAST WACKER DRIVE

ONE EAST WACKER DRIVE

SIGNATURE PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

☐ Delete

☐ Change

☐ Change

Change

☐ Addition

Addition

Addition

FILED Jul 15, 2005 8:00 am

Secrétary of State

Additional Directors:

D Konar, Edward J. One East Wacker Dr. Chicago, IL 60601

D Roeske, Richard (NMI) One East Wacker Dr. Chicago, IL 60601

D Royster, Don M. Sr. 12115 Lackland Rd. St. Louis, MO 63146 #707294 20064208