

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90131 029 ***150.00

0524429

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P21440
 1. Corporation Name
VICTORIA FIRE & CASUALTY COMPANY



Principal Place of Business ATTN: FINANCE 5915 LANDERBROOK DR. CLEVELAND OH 44124-4058 US	Mailing Address ATTN: FINANCE 5915 LANDERBROOK DR. CLEVELAND OH 44121-4058 US
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip Country 24 25	Zip Country 29 30

3. Date Incorporated or Qualified 10/25/1988	Applied For Not Applicable
4. FEI Number 34-1394913	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**THE FLORIDA INSURANCE COMMISSIONER
 THE CAPITOL
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T <input checked="" type="checkbox"/> DELETE	1.1 TITLE	TO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KOERMER, JANICE	1.2 NAME	Thomas Andrew Bradley
STREET ADDRESS	5915 LANDERBROOK DR	1.3 STREET ADDRESS	385 Washington Street
CITY-ST-ZIP	CLEVELAND OH 44124	1.4 CITY-ST-ZIP	St. Paul, Minnesota 55102
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	Assistant Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRAMER, IVAN	2.2 NAME	
STREET ADDRESS	5915 LANDERBROOK DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND OH	2.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MUELLER, ROBERT W	3.2 NAME	Joseph William Metz
STREET ADDRESS	5915 LANDERBROOK DR.	3.3 STREET ADDRESS	5915 Landerbrook Drive
CITY-ST-ZIP	CLEVELAND OH	3.4 CITY-ST-ZIP	Cleveland, Ohio 44124
TITLE	AS <input checked="" type="checkbox"/> DELETE	4.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOFFEN, JOHN F	4.2 NAME	Sandra Ukaker Wiese
STREET ADDRESS	6225 SMITH AVE	4.3 STREET ADDRESS	385 Washington Street
CITY-ST-ZIP	BALTIMORE MD	4.4 CITY-ST-ZIP	St. Paul, Minnesota 55102
TITLE	VD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLNER, STUART	5.2 NAME	Paul James Liska
STREET ADDRESS	5915 LANDERBROOK DR.	5.3 STREET ADDRESS	385 Washington Street
CITY-ST-ZIP	CLEVELAND OH	5.4 CITY-ST-ZIP	St. Paul, Minnesota 55102
TITLE	VD <input checked="" type="checkbox"/> DELETE	6.1 TITLE	C <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIETRY, MICHAEL	6.2 NAME	Mary Lura Duvall
STREET ADDRESS	5915 LANDERBROOK DR	6.3 STREET ADDRESS	385 Washington Street
CITY-ST-ZIP	CLEVELAND OH	6.4 CITY-ST-ZIP	St. Paul, Minnesota 55102

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Date: **4/29/99** Daytime Phone #: **440-461-3461**

CR2E034 (1/98)

VICTORIA FIRE & CASUALTY COMPANY

P21440
5323619013129

Officers

Robert William Mueller, President

5915 Landerbrook Drive,
Cleveland, Ohio 44124

Joseph William Metz, Vice President

5915 Landerbrook Drive,
Cleveland, Ohio 44124

Ivan Kramer, Assistant Secretary

5915 Landerbrook Drive,
Cleveland, Ohio 44124

Raymond Karl Mueller, Assistant Treasurer

5915 Landerbrook Drive,
Cleveland, Ohio 44124

Mary Lura Duvall, Controller

385 Washington Street,
St. Paul, Minnesota 55102

John Charles Treacy, Finl Acctg & IS Officer

385 Washington Street,
St. Paul, Minnesota 55102

Sandra Ulsaker Wiese, Secretary

385 Washington Street,
St. Paul, Minnesota 55102

Paul James Liska, Exec VP & CFO

385 Washington Street,
St. Paul, Minnesota 55102

Thomas Andrew Bradley, Treasurer

385 Washington Street,
St. Paul, Minnesota 55102

Directors

Thomas Andrew Bradley

385 Washington Street,
St. Paul, Minnesota 55102

Robert William Mueller

5915 Landerbrook Drive,
Cleveland, Ohio 44124

Michael James Conroy

385 Washington Street,
St. Paul, Minnesota 55102

Joseph Bruno Nardi

385 Washington Street,
St. Paul, Minnesota 55102

Stephen James Klingel

385 Washington Street,
St. Paul, Minnesota 55102

Maureen Ann Phillips

385 Washington Street,
St. Paul, Minnesota 55102

Paul James Liska

385 Washington Street,
St. Paul, Minnesota 55102