

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P23471** (6)  
1. Corporation Name  
**CENTURION CASUALTY COMPANY**



Principal Place of Business: **206 EIGHTH STREET DES MOINES IA 50309**  
Mailing Address: **206 EIGHTH STREET DES MOINES IA 50309**

3. Date Incorporated or Qualified: **03/20/1989**  
3a. Date of Last Report: **02/27/1995**  
4. FEI Number: **42-1194107**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

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

9. Name and Address of Current Registered Agent: **DRUMHELLER, J F 250 INTERNATIONAL PKWY SUITE 146 HEATHROW FL 32746**  
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code **FL**

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
(NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	SOVP	<input type="checkbox"/> DELETE
NAME	MCFARLAND, PATRICIA J	
STREET ADDRESS	206 EIGHTH STREET	
CITY-STATE-ZIP	DES MOINES IA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WOOD, DAVID C.	
STREET ADDRESS	206 EIGHTH STREET	
CITY-STATE-ZIP	DES MOINES IA	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	BERENS, JAMES R.	
STREET ADDRESS	206 EIGHTH STREET	
CITY-STATE-ZIP	DES MOINES IA	
TITLE	TDV	<input type="checkbox"/> DELETE
NAME	YOUNG, DENNIS E.	
STREET ADDRESS	206 EIGHTH STREET	
CITY-STATE-ZIP	DES MOINES IA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BETTLE, ROBERT W.	
STREET ADDRESS	206 EIGHTH STREET	
CITY-STATE-ZIP	DES MOINES IA	
TITLE	DVP	<input checked="" type="checkbox"/> DELETE
NAME	SINGSAAS, GORDON C.	
STREET ADDRESS	206 EIGHTH STREET	
CITY-STATE-ZIP	DES MOINES IA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S V D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-STATE-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-STATE-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Ronald R. Merritt	
6.3 STREET ADDRESS	206 Eighth Street	
6.4 CITY-STATE-ZIP	Des Moines, IA	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the safe harbor provisions of Section 119.07(3)(k), 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.

SIGNATURE: *Ronald R. Merritt* **Ronald R. Merritt** 2/21/96 515 243 2131  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

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Centurion Casualty Company

James R. Berens  
President - Director  
206 Eighth Street  
Des Moines, IA

David C. Wood  
Director  
206 Eighth Street  
Des Moines, IA

Patricia J. McFarland  
Vice President-Secretary-Director  
206 Eighth Street  
Des Moines, IA

Dennis E. Young  
Vice President-Treasurer-Director  
206 Eighth Street  
Des Moines, IA

John C. Freeland  
Vice President  
206 Eighth Street  
Des Moines, IA

Robert W. Bettie  
Vice President  
206 Eighth Street  
Des Moines, IA

Jeffrey D. Cash  
Vice President-Director  
206 Eighth Street  
Des Moines, IA

Ronald R. Merritt  
Vice President  
206 Eighth Street  
Des Moines, IA