FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAR 13 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P36075 (0)

1. Corporation Name
TIG INSURANCE CORPORATION OF AMERICA

Principal Place of Business	Mailing Address
70 WEST MICHIGAN AVNEUE BATTLE CREEK MI 49017 US	70 WEST MICHIGAN AVNEUE BATTLE CREEK MI 49017 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/23/1991
3a. Date of Last Report: 04/05/1994

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

4. FEI Number: 71-0238628 ☐ Applied For ☐ Not Applicable

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

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
STATE CAPITOL, PLAZA LEVEL ELEVEN
TALLAHASSEE FL 32399-0300

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when name altering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☒ Change ☐ Addition
NAME	HUTSON, DON D	1.2 NAME		
STREET ADDRESS	6300 CANOGA AVENUE	1.3 STREET ADDRESS	5205 n. O' Connor Blvd.	
CITY-ST-ZIP	WOODLAND HILLS CA	1.4 CITY-ST-ZIP	Irving, TX 75039	
TITLE	VD	2.1 TITLE	EVP & Director	☒ Change ☒ Addition
NAME	VAUGHN, MARK S	2.2 NAME	Harry B. cotter	
STREET ADDRESS	70 W. MICHIGAN AVENUE	2.3 STREET ADDRESS	70 West Michigan Ave.	
CITY-ST-ZIP	BATTLE CREEK MI	2.4 CITY-ST-ZIP	Battle Creek, MI 49017	
TITLE	VSD	3.1 TITLE		☒ Change ☐ Addition
NAME	HUFF, WILLIAM H III	3.2 NAME		
STREET ADDRESS	6300 CANOGA AVENUE	3.3 STREET ADDRESS	5205 N. O'Connor Blvd.	
CITY-ST-ZIP	WOODLAND HILLS CA	3.4 CITY-ST-ZIP	Irving, TX 75039	
TITLE	VD	4.1 TITLE		☐ Change ☐ Addition
NAME	SCHOLL, DAVID C	4.2 NAME		
STREET ADDRESS	5205 N. O'CONNOR BLVD.	4.3 STREET ADDRESS		
CITY-ST-ZIP	IRVING TX	4.4 CITY-ST-ZIP		
TITLE	T	5.1 TITLE	Vice President & Director	☒ Change ☐ Addition
NAME	DILLARD, JOAN H	5.2 NAME		
STREET ADDRESS	5205 N. O'CONNOR BLVD.	5.3 STREET ADDRESS	70 West Michigan Ave.	
CITY-ST-ZIP	IRVING TX	5.4 CITY-ST-ZIP	Battle Creek, MI 49017	
TITLE	VD	6.1 TITLE		☒ Change ☐ Addition
NAME	PICKETT, EDWIN G	6.2 NAME		
STREET ADDRESS	6300 CANOGA AVENUE	6.3 STREET ADDRESS	5205 N. O'Connor Blvd.	
CITY-ST-ZIP	WOODLAND HILLS CA	6.4 CITY-ST-ZIP	Irving, TX 75039	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: William N. Muff, III 3-6-95 (214)831-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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TIG INSURANCE CORPORATION OF AMERICA
PROFIT CORPORATION ANNUAL REPORT

12. Additional names, titles and addresses of directors and officers:

NAME	TITLE	ADDRESS
Kenneth M. Fujino	Director	5205 N. O'Connor Blvd. Irving, TX 75039
William B. Loden	Director	5205 N. O'Connor Blvd. Irving, TX 75039
Jon W. Rotenstreich	Director	65 East 55th Street New York, NY 10022
Denise M. Abood	Treasurer	5205 N. O'Connor Blvd. Irving, TX 75039
Steven A. Cook	Vice President	5205 N. O'Connor Blvd. Irving, Tx 75039
Cynthia D. Crandall	Vice President	5205 N. O'Connor Blvd. Irving, Tx 75039
Lloyd E. Hanson	Vice President	5205 N. O'Connor Blvd. Irving, Tx 75039