

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P40446

1. Entity Name

PHICO INSURANCE COMPANY

**FILED**  
**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90268 048 \*\*\*150.00

Principal Place of Business

ONE PHICO DR.  
P. O. BOX 85  
MECHANICSBURG PA 17055-0085

Mailing Address

ONE PHICO DR.  
P. O. BOX 85  
MECHANICSBURG PA 17055-0085

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **23-2066198**

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

INSURANCE COMMISSIONER  
CAPITOL  
TALLAHASSEE FL 32399-0300

Name

C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City  
Plantation

FL

Zip Code  
33324

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-statuting)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	CREAMER, DONALS R	
STREET ADDRESS	1001 GRAMPIAN BLVD	
CITY-ST-ZIP	WILLIAMSPORT PA 17701	
TITLE	D	<input type="checkbox"/> Delete
NAME	FOSTER, CONSTANCE B	
STREET ADDRESS	2 N 2ND ST 7TH FL	
CITY-ST-ZIP	HARRISBURG PA 17101	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAMERJIAN, ROBERT S.	
STREET ADDRESS	ONE PENN CENTER PLAZA	
CITY-ST-ZIP	PHILADELPHIA PA	
TITLE	D	<input type="checkbox"/> Delete
NAME	FLETCHER, ROBERT L.	
STREET ADDRESS	625 TWIN PINE RD.	
CITY-ST-ZIP	PITTSBURGH PA	
TITLE	D	<input type="checkbox"/> Delete
NAME	NATION, ROBERT F.	
STREET ADDRESS	1924 MARKET ST.	
CITY-ST-ZIP	CAMP HILL PA	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	PERSOFSKY, BARRY	
STREET ADDRESS	ONE PHICO DRIVE, P.O. BOX 85	
CITY-ST-ZIP	MECHANICSBURG PA	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	One Phico Drive, PO Box 85	
CITY-ST-ZIP	Mechanicsburg, PA 17055-0085	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sheryl M. Simmons	
STREET ADDRESS	One Phico Drive, PO Box 85	
CITY-ST-ZIP	Mechanicsburg, PA 17055-0085	

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sheryl M. Simmons

VP & Treasurer

Date

4/20/01

Daytime Phone: #

(717) 766-1122

CR2E034 (10/00)

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**ADDITIONAL OFFICERS**

*Ronald E. Chronister*, Vice President  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Mark O. Mitchell*, Sr. Vice President  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Victoria A. Reider*, Esquire, Sr. Vice President and General Counsel  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Gary J. Schultz*, CPA, Sr. Vice President, Chief Financial Officer  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Michael P. Sullivan*, Sr. Vice President  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Patrick J. Amice*, Vice President  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Michael C. Bricker*, CPCU, Vice President  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*William E. Burns*, ACAS, MAAA, Sr. Vice President  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Robert E. Curry*, Vice President  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085

*Ellen L. Myers*, Secretary  
One Phico Drive, PO Box 85  
Mechanicsburg, PA 17055-0085