

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90149 049 ***150.00

DOCUMENT # 853453

1. Entity Name

VANLINER INSURANCE COMPANY

Principal Place of Business

**ONE PERIMETER DRIVE
 ST LOUIS MO 63026
 US**

Mailing Address

**ONE UNITED DRIVE
 FENTON MO 63026
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
One Premier Drive

3. Mailing Address
One Premier Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
St. Louis, MO 63026

City & State
St. Louis, MO

4. FEI Number
86-0114294

Applied For
 Not Applicable

Zip Country

Zip Country
63026 US

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER
 THE CAPITAL BUILDING
 TALLAHASSEE FLORIDA FL 32301**

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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, 2002 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	P	<input type="checkbox"/> Delete
NAME	TEMPORITI, JOHN	
STREET ADDRESS	ONE PREMIER DR	
CITY-ST-ZIP	ST LOUIS MO	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DOYLE, THOMAS A	
STREET ADDRESS	ONE PREMIER DR	
CITY-ST-ZIP	ST LOUIS MO	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MACDOWELL, MICHAEL A	
STREET ADDRESS	ONE PREMIER DR	
CITY-ST-ZIP	ST LOUIS MO	
TITLE	C	<input type="checkbox"/> Delete
NAME	BELL, QUINN A.	
STREET ADDRESS	815 SOUTHMAIN	
CITY-ST-ZIP	JACKSONVILLE FL 32207-8187	
TITLE	D	<input type="checkbox"/> Delete
NAME	CORRIGAN, DAVID	
STREET ADDRESS	23923 RESEARCH DRIVE	
CITY-ST-ZIP	FARMINGTON MI 48335	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STADLER, GERALD	
STREET ADDRESS	3637 EAST MAIMI AVENUE	
CITY-ST-ZIP	PHOENIX AZ 85040	

TITLE	Treasurer/Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Derheimer, Mark	
STREET ADDRESS	One Premier Drive	
CITY-ST-ZIP	St. Louis, MO	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Anderson, Richard	
STREET ADDRESS	One Premier Drive	
CITY-ST-ZIP	St. Louis, MO	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dusenberry, Bruce	
STREET ADDRESS	One Premier Drive	
CITY-ST-ZIP	St. Louis, MO	
TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Preston, Gale	
STREET ADDRESS	One Premier Drive	
CITY-ST-ZIP	St. Louis, MO	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Weir, David	
STREET ADDRESS	One Premier Drive	
CITY-ST-ZIP	St. Louis, MO	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sabada, David	
STREET ADDRESS	One Premier Drive	
CITY-ST-ZIP	St. Louis, MO	

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:

John Temporiti
John Temporiti, President

4/22/02

636-349-3882

Date

Daytime Phone #

CR2E034 (9/01)

ATTACH # 853453 / 648352



Additions to Officers and Directors in 11

D
Harrison, David
One Premier Drive
St. Louis, MO 63026

D
Johnson, Mark
One Premier Drive
St. Louis, MO 63026

D
Davis, Lawrence
One Premier Drive
St. Louis, MO 63026

D
Kendrick, James
One Premier Drive
St. Louis, MO 63026