# FILED May 13, 2004 8:00 am Secretary of State 04-28-2004 90239 039 \*\*\*150.00

ANNUAL REPORT	
DOCUMENT # 848922	

1. Entity Name MIC GENERAL INSURANCE CORPORATION									
Principal Place of Business Mailing Address 300 GALLERIA OFFICENTRE 500 WEST FIFTH STREET STE 200 WINSTON-SALEN, NC 271 SOUTHFIELD, MI 48034 US				· · · · · · · · · · · · · · · · · · ·	66421476				Pari 11.782)
2. Principal P	lace of Business	3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.					02032004	Chg-P	CR2E034 (	(10/03)	
City & State	6	City & State	-		4. FEI Number 35-1492	884			plied For Applicable
Žip	Country	Ζíp	Country		5. Certificate o	Status Desired		75 Add Required	
	6. Name and Address of Current	Registered Agent	·Na	ama .	7. Name and /	Address of New R	egistered Age	nt	
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200)				Street Address (P.O. Box Number is Not Acceptable)					
200 E. GAI TALLAHAS	INES ST SSEE, FL 32399-0000		<del></del>		·····	<u> </u>	·		
			Cit	ty		,	FL	Zip Code	9
	named entity submits this statement for tions of registered agent.	r the purpose of changing its r	egistered off	fice or register	red agent, or both	, in the State of Flo	orida. I am fami	liar with.	and accept
SIGNATURE.	Signature, typed or printed name of registered agent	and the if applicable. (NOTE:	Registered Agen	N eigneture required	d when ruinstating)	<u>-</u>	DATE		\
FIL After M	E NOWIII FEE IS \$150,00 ay 1, 2004 Fee will be \$550.	9. Election Campaig Trust Fund Contri			.00 May Be led to Fees				
10.	OFFICERS AND		11.	VPS		HANGES TO OFF			
NAME STREET ADDRESS CITY-ST-ZIP	PCD KUSUMI, GARY Y ONE GMA INSURANCE PLAZA HAZELWOOD, FL 63045	C Delate	TITLE NAME STREET ADD CITY-ST-ZE	She 500	ena E. Po West Fi	fth Stree	t.	Change	K Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS PURVINES, VERNE E ONE NATIONAL GENERAL PLA HAZELWOOD, MO 63045	☐ Delets	TITLE NAME STREET ADD	ORESS VIIIS	SEON—SALE	em, NC 27		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCAO BOLAR, DONALD J 500 WEST FIFTH STREET WINSTON SALEM, NC 27152	. Deleta	TITLE NAME STREET ADD CITY-ST-20	4				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BEATTIE, JOHN C 500 WEST FIFTH STREET WINSTON-SALEM, NC 27152	Oefste	NAME STREET ADD CITY-ST-21	<b>I</b>				Change	Addition -
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP BUSELMEIR, BENARD J ONE GMAC INSURANCE PLAZ HAZELWOOD, FL 27152	Delete	TITLE NAME STREET ADD CITY+ST+21					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPCD PICKEN, DANIEL C 500 WEST FIFTH STREET WINSTON SALEM, NC 27152	☐ Deliste	TITLE NAME STREET ADO CITY-ST-ZI	IP .				Change	Addition
12. 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 eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
SIGNAT	TURE: SGATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER O		na E. P	oe 4/	20/04 (3		-2675	<u></u>
							vaju	~	

Affachment

16421476 # 848922

## MIC GENERAL INSURANCE CORPORATION

## **DIRECTORS**

One GMAC Insurance Plaza, Hazelwood, MO 63045 Gary Y. Kusumi John C. Beattie 500 West Fifth Street, Winston-Salem, NC 27152 Bernard J. Buselmeier One GMAC Insurance Plaza, Hazelwood, MO 63045 Daniel J. Evangelista, Jr. 500 West Fifth Street, Winston-Salem, NC 27152 Gerald D. Filler One GMAC Insurance Plaza, Hazelwood, MO 63045 William B. Noll 300 Galleria Officentre, Suite 200, Southfield, MI 48086 Daniel C. Pickens 500 West Fifth Street, Winston-Salem, NC 27152 John Urankar One GMAC Insurance Plaza, Hazelwood, MO 63045 Mitchell F. White 817 W. Peachtree St., Suite 750, Atlanta GA 30308

# **EXECUTIVE OFFICERS**

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