


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2006 8:00 am**  
**Secretary of State**

04-25-2006 90105 001 \*\*\*150.00

<b>DOCUMENT # 805038</b>	
1. Entity Name <b>AMERICAN MOTORISTS INSURANCE COMPANY</b>	

Principal Place of Business <b>ONE KEMPER DRIVE LEGAL 125W-0670 LONG GROVE, IL 60049 US</b>	Mailing Address <b>ONE KEMPER DRIVE LEGAL 125W-0670 LONG GROVE, IL 60049 US</b>
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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04142006 Chg-P CR2E034 (11/05)

4. FEI Number <b>36-0727430</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b>
<b>CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399</b>

<b>7. Name and Address of New Registered Agent</b>
Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.

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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO ANDREWS, DOUGLAS G 1 KEMPER DRIVE LONG GROVE, IL 60049</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S CONWAY, JOHN K ONE KIMPER DRIVE LONG GROVE, IL 600490001</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD MATHIS, DAVID B ONE KIMPER DRIVE LONG GROVE, IL 60049</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP SNYDER, JOHN F 1 KEMPER DRIVE LONG GROVE, IL 60049</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SG V.P., ACTUARY FREDERCK OTTO KIST 1 KEMPER DRIVE LONG GROVE, IL 60049</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFT SYNDER, JOHN F 1 KEMPER DRIVE LONG GROVE, IL 60049</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SG V.P. BENJAMIN DAVID L. SCHWARTZ 1 KEMPER DRIVE LONG GROVE, IL 60049</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **JOHN K. CONWAY** **4-18-06** **847-320-3262**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# ATTACHMENT

40061695

#805038

## Directors, Officers Report

### American Motorists Insurance Company

Friday, April 14, 2006

#### DIRECTORS

David Barrett Mathis

##### Chairman

First Elected: Tuesday, December 31, 2002

##### Director

First Elected: Thursday, June 01, 1995

John Thomas Chain, Jr.

##### Director

First Elected: Monday, January 15, 1996

J. Reed Coleman

##### Director

First Elected: Monday, May 08, 1972

James Robert Edgar

##### Director

First Elected: Wednesday, February 24, 1999

Peter Bannerman Hamilton

##### Director

First Elected: Monday, January 15, 1996

Roberta Segal Karmel

##### Director

First Elected: Tuesday, May 17, 1994

George Ralph Lewis

##### Director

First Elected: Tuesday, May 18, 1993

#### OFFICERS

Douglas Sean Andrews

##### President and Chief Executive Officer

First Elected: Thursday, January 06, 2005

Frederick Otto Kist

##### Senior Vice President - Actuary

First Elected: Tuesday, May 15, 2001

Benjamin David L. Schwartz

##### Senior Vice President

First Elected: Monday, August 09, 2004

Eric S. Epperson

##### Vice President

First Elected: Thursday, February 26, 2004

Robert Paul Hames

##### Vice President

American Motorists Insurance Company

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ATTACHMENT

40061695

First Elected: Wednesday, August 26, 1998

# 805038

**Neil Bailey Miner**

**Vice President**

First Elected: Tuesday, May 15, 2001

**Barbara K. Murray**

**Vice President**

First Elected: Thursday, November 17, 2005

**John Keating Conway**

**Corporate Secretary**

First Elected: Tuesday, May 16, 1995

**General Counsel**

First Elected: Saturday, March 02, 1991

**G. Andrew Cooke**

**Treasurer**

First Elected: Thursday, September 29, 2005

**Fred T Griffith**

**Chief Accounting Officer**

First Elected: Thursday, September 29, 2005