2008 FOR PROFIT CORPORATION

FILED Apr 02, 2008 8:00 am

ANNUAL REPURI						Secretary of Stat					
DOCUMENT # F0500003499 1. Entity Name VICTORIA INSURANCE COMPANY								-2008 900	-		
Principal Place of Business Mailing Address			··			4					
30833 NORTHWESTERN HWY SUITE 220 FARMINGTON, MI 48334		30833 NORTHWESTERN HWY, SUITE 220 FARMINGTON HILLS, MI 48334					· ·				
30833 NO	ace o' Business - No P.O. Box # DRTHWESTERN HWY.	3. Mailing Address 30833 NORTHWESTERN HWY.			VY.						
Suite, Apt.		Suite, Apt. #, etc.				03262008	Chg-P	CR2E034	1 (12/06)		
SUITE 22 City & State		SUITE 220 City & State				4. FEI Numbe			- I Ani	oliec For	
	GTON HILLS, MI	FARMINGTON HILLS, MI				31-167			→ <u></u>	Applicable	
Zip	Country	Zip	Coun			~~~			8.75 Addi		
48334	USÁ	48334	USA		Į	5. Certificate	of Status Desired		ee Required		
	6. Name and Address of Current F	Registered Agent				7. Name and	Address of New R	Registered Ag	ent		
				Name	Name						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)							
1 2 417/11/01/1/ 2 33321											
				City				FL	Zip Code		
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	ed office or r	registere	d agent, or bo	th, in the State of Fl	orida. 1 am fa	niliar with, a	ind accept	
SIGNATURE	Signature, typed or printed name of registered agent a	nd the displicable. (NO)	t: Hegysterer	d Agent signatur	re recurred w	fien reinstating)		UATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financi Trust Fund Contribution.						0 May Be d to Fees					
10.	OFFICERS AND L	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AND D	RECTORS	IN 11	
TITLE	D	Delete	TITLE	- 1	VD			[Change	Addition 🔀	
NAME Street Address City+St-Zip	· · · · · · · · · · · · · · · · · · ·			FT ADDRESS	MULDOWNEY, DANIEL T. 30833 NORTHWESTERN HWY., STE. 220 FARMINGTON HILLS, MI 48334						
TITLE	D	≱ Delete	TITLE		Τ				Change	X Addition	
NAME	MCCORD, WILLIAM M		NAVI	£	MAR	TIN, MICI	HAEL O.				
Street address	30833 NORTHWESTERN HWY,	SUITE 220	STRE	et adoress	30833	3 NORTH	WESTERN I	HWY., ST	E. 220		
CITY-ST-ZIP	FARMINGTON HILLS, MI 48334		CITY				HILLS, MI 4				
TITLE	D	X Delete	TITLE	1	SD				Change	Addition	
NAME	KIERNAN, STEVEN P		NAV			(EL, MAR					
STREET ADDRESS	30833 NORTHWESTERN HWY,	SUITE 220					WESTERN H		E. 220		
CITY-ST-ZIP	FARMINGTON HILLS, MI 48334		CITY			IINGTON	HILLS, MI 4	8334			
T∤∓LE	V	Defete	TITLE		VD			Į.	X Change	Addition	
NAME	PRICE, DAVID J		NAM	1		E, DAVID					
STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			I			WESTERN I		ITE 220	ł	
	FARMINGTON HILLS, MI 48334	······				<u>MINGTON</u>	HILLS, MI 4				
TITLE	D	Delete	TITLE	- 1	D	NORA M	ADK	Į.	Change	X Addition	
			NAM STRE	I		VSKY, M		JVA/V CT	E 220		
							WESTERN F		₾. 220		
					<u>FARN</u> VD	IIING I UN	HILLS, MI 4		Change	✓ Apabia	
TITLE NAME	V CARSON, DONALD R	Delete	TITLE	-	-	SON, DOI	IAI D R	l	C) Glange	Addition	
STREET ADDRESS	30833 NORTHWESTERN HWY,	SUITE 220					WESTERN H	TO YMIL	F 220		
CITY-ST-ZIP	FARMINGTON HILLS, MI 48334	55 LLO					HILLS, MI 4		220		
		this filling does not qualify fr							that the in	formation	
indicated	ertify that the information supplied with on this report or supplemental report is	true and accurate and that	ny signal	ture shall ha	ave the sa	me legal eflec	t as if made under	oath; that I am	an officer	or director	

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.

IGNATURE:

MICHAEZ O. MARTIN 3/27/08 (248)539-606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Degine Phone II SIGNATURE: