

3-18-98 B 3408 C

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 242415 (8)
 1. Corporation Name
INDEPENDENT FIRE INSURANCE COMPANY

Principal Place of Business ONE INDEPENDENT DRIVE JACKSONVILLE FL 32276	Mailing Address ONE INDEPENDENT DRIVE JACKSONVILLE FL 32276
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 American General Center 27 Suite, Apt. #, etc. 28 Nashville, TN 29 37250 Country		3. Date Incorporated or Qualified 11/30/1960 4. FEI Number 59-1266516 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
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9. Name and Address of Current Registered Agent INSURANCE COMMISSIONER STATE OF FLORIDA CAPITOL BLDG. TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SITTIG, JOHN J. ONE INDEPENDENT DR JACKSONVILLE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD D'AGOSTINO, JAMES JR. AMERICAN GENERAL CENTER NASHVILLE TN	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	CD D'Agostino, James S., Jr. 2929 Allen Parkway Houston, TX 77019
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KELLEY, JOE ONE INDEPENDENT DR JACKSONVILLE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	PD Kelley, Joe American General Center Nashville, TN 37250
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SRVP BARRETT, KENT E. AMERICAN GENERAL CENTER NASHVILLE TN	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	SVPTD Barrett, Kent E. American General Center Nashville, TN 37250
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ROBERTS, REX H AMERICAN GENERAL CENTER NASHVILLE TN	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SRVP LEBOS, LEO J AMERICAN GENERAL CENTER NASHVILLE TN	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	SVPD Lebos, Leo, Jr. American General Center Nashville, TN 37250

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rex H. Roberts *Rex H. Roberts* 1-21-98 615-749-1993 **SEE ATTACHED**

CP2E034 (10/97)

INDEPENDENT FIRE INSURANCE COMPANY

7. **SC/D**
Devlin, Robert M.
2929 Allen Parkway
Houston, TX 77019
8. **VC/D**
Luther, Bill B.
American General Center
Nashville, TN 37250
9. **VC/D**
Newton, Jon P.
2929 Allen Parkway
Houston, TX 77019
10. **EVP/D**
Tasser, Donald J.
American General Center
Nashville, TN 37250
11. **SVP/D**
Buckley, Michael J.
American General Center
Nashville, TN 37250
12. **SVP/D**
Gibbs, Marcus C.
American General Center
Nashville, TN 37250
13. **SVP/D**
McReynolds, Elaine A.
American General Center
Nashville, TN 37250
14. **VP**
Aiken, Chris N.
American General Center
Nashville, TN 37250
15. **VP**
Coleman, John W.
American General Center
Nashville, TN 37250
16. **VP/D**
Tuters, Peter V.
2929 Allen Parkway
Houston, TX 77019