

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90142 014 ***150.00

DOCUMENT # 363042

1. Corporation Name

AMERICAN GENERAL PROPERTY INSURANCE COMPANY OF FLORIDA

Principal Place of Business

ONE INDEPENDENT DRIVE
JACKSONVILLE FL 32276

Mailing Address

AMERICAN GENERAL CENTER
NASHVILLE TN 37250
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/1970

4. FEI Number

59-1289686

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32304

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

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

TITLE CD ☐ DELETE

NAME D'AGOSTINO, JAMES S. JR
STREET ADDRESS 2929 ALLEN PARKWAY
CITY-ST-ZIP HOUSTON TX 77019

TITLE PD ☐ DELETE

NAME KELLEY, JOE
STREET ADDRESS AMERICAN GENERAL CENTER
CITY-ST-ZIP NASHVILLE TN 37250

TITLE SVTD ☐ DELETE

NAME BARRETT, KENT E.
STREET ADDRESS AMERICAN GENERAL CENTER
CITY-ST-ZIP NASHVILLE TN 37250

TITLE S ☐ DELETE

NAME ROBERTS, REX H
STREET ADDRESS AMERICAN GENERAL CENTER
CITY-ST-ZIP NASHVILLE TN

TITLE SVPD ☐ DELETE

NAME LEBOS, LEO J
STREET ADDRESS AMERICAN GENERAL CENTER
CITY-ST-ZIP NASHVILLE TN 37250

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CD ☒ Change ☐ Addition

1.2 NAME Martin, Rodney O., Jr.
1.3 STREET ADDRESS 2929 Allen Parkway
1.4 CITY-ST-ZIP Houston, TX 77019

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE EVT ☒ Change ☐ Addition

3.2 NAME Rodby, Craig R.
3.3 STREET ADDRESS American General Center
3.4 CITY-ST-ZIP Nashville, TN 37250

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE EVD ☐ Change ☒ Addition

6.2 NAME Buckley, Michael J.
6.3 STREET ADDRESS American General Center
6.4 CITY-ST-ZIP 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 with all other like empowered.

SIGNATURE: Rex H. Roberts

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/99

Date

615-749-1993

Daytime Phone #

0523742

CR2E034 (11/98)