

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 24 PM 12:14

DOCUMENT # 583494

(0)

1. Corporation Name

INFINITY INSURANCE COMPANY

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**10004 N DALE MADRY HWY
TAMPA FL 33618-4410
US**

Mailing Address

**P.O. BOX 830189
BIRMINGHAM AL 35283-0189
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/28/1978

3a. Date of Last Report

04/25/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

31-0943862

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32304**

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 nonattesting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GOBER, JAMES R
STREET ADDRESS	2204 LAKESHORE DRIVE
CITY - ST - ZIP	BIRMINGHAM AL
TITLE	C
NAME	KRAUSE, MICHAEL D
STREET ADDRESS	1300 PARKWOOD CIRCLE
CITY - ST - ZIP	ATLANTA GA
TITLE	VTD
NAME	PRESTRIDGE, ROGER H
STREET ADDRESS	2204 LAKESHORE DR
CITY - ST - ZIP	BIRMINGHAM AL
TITLE	VS
NAME	DIBBLE, WILLIAM H
STREET ADDRESS	2204 LAKESHORE DR
CITY - ST - ZIP	BIRMINGHAM AL
TITLE	V
NAME	WILLIAMS, SHELIA H
STREET ADDRESS	2204 LAKESHORE DRIVE
CITY - ST - ZIP	BIRMINGHAM AL
TITLE	VGC
NAME	BECKER, LAWRENCE G
STREET ADDRESS	ONE EAST FOURTH STREET
CITY - ST - ZIP	CINCINNATI OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	C/D ☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
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	V/AS ☒ Change ☐ Addition
6.2 NAME	CARLSON, RICHARD A
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Roger H. Prestridge, V.P. & Treasurer

4/18/95

203/803-8266

Date

Daytime Phone #

583494

INFINITY INSURANCE COMPANY

12. OFFICERS & DIRECTORS (Continued)

7.1 V
7.2 Kennedy, William R.
7.3 2204 Lakeshore Drive
7.4 Birmingham, AL

8.1 V
8.2 Allmond, Thomas R.
8.3 2204 Lakeshore Drive
8.4 Birmingham, AL

9.1 V/S/D
9.2 Olson, Robert W.
9.3 One East Fourth Street
9.4 Cincinnati, OH

10.1 D
10.2 Amory, Robert F.
10.3 One East Fourth Street
10.4 Cincinnati, OH

11.1 D
11.2 Hahl, Neil M.
11.3 One East Fourth Street
11.4 Cincinnati, OH

12.1 D
12.2 Meyers, Pamela Sue
12.3 One East Fourth Street
12.4 Cincinnati, OH