

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

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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 583494

(0)

1. Corporation Name

INFINITY INSURANCE COMPANY

FILED
97 MAY 16 PM 4: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

10004 N DALE MABRY HWY
TAMPA FL 33618-4410
US

Mailing Address

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32304

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

08/28/1978

3a. Date of Last Report

04/30/1996

4. FEI Number

31-0943862

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

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 NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

PC
GOBER, JAMES R
2204 LAKESHORE DRIVE
BIRMINGHAM AL

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

D
KRAUSE, MICHAEL D
1300 PARKWOOD CIRCLE
ATLANTA GA

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

VTD
PRESTRIDGE, ROGER H
2204 LAKESHORE DR
BIRMINGHAM AL

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

VSD
DIBBLE, WILLIAM H
2204 LAKESHORE DR
BIRMINGHAM AL

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

V
WILLIAMS, SHELIA H
2204 LAKESHORE DRIVE
BIRMINGHAM AL

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ DELETE

VASD
HORRELL, KAREN HOLLEY
580 WALNUT ST
CINCINNATI OH

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PCD

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

☐ Change ☐ Addition

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*****550.00 *****550.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. I do 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

5/5/97

305/803-8266

CR2E034 (9/96)

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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 Godwin, Glen N.
8.3 2204 Lakeshore Drive
8.4 Birmingham, AL

9.1 D
9.2 Amory, Robert F.
9.3 One East Fourth Street
9.4 Cincinnati, OH

10.1 D
10.2 Lindner, Carl III
10.3 580 Walnut Street
10.4 Cincinnati, OH

11.1 D
11.2 Lindner, S. Craig
11.3 580 Walnut Street
11.4 Cincinnati, OH

12.1 D
12.2 Rosen, Eve Cutler
12.3 580 Walnut Street
12.4 Cincinnati, OH