## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 645072**

Entity Name: EMPLOYERS ASSURANCE COMPANY

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
701 US HW SUITE 200 N PALM BE	/Y 1 EACH, FL 33408	US				
Current Mailing Address:			New Mail	New Mailing Address:		
PO BOX 88 N PALM BE	BOX 88806 ALM BEACH, FL 33408 US		C/O EMPL	10375 PROFESSIONAL CIRCLE C/O EMPLOYERS RENO, NV 89521 US		
FEI Number:	61-0477370 F	El Number Applied For ( )	El Number Not App	pplicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name an				nd Address of New Registered Agent:		
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 US						
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.						
SIGNATUR	E:					
Electronic Signature of Registered Agent				Date		
Election Cam	paign Financing Tru	ust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	C () Dele KOLESAR, ROBER 10375 PROFESSIO RENO, NV 89521	T JOHN	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () Delo DIRKS, DOUGLAS I 10375 PROFESSIO RENO, NV 89521	DEAN	Title: Name: Address: City-St-Zip:	DCEO (X) Change ( ) Addition DIRKS, DOUGLAS DEAN 10375 PROFESSIONAL CIRCLE RENO, NV 89521		
Title: Name: Address: City-St-Zip:	D () Delo ORMSBY, LENARD 10375 PROFESSIO RENO, NV 89521	THOMAS	Title: Name: Address: City-St-Zip:	DAS (X) Change ( ) Addition ORMSBY, LENARD THOMAS 10375 PROFESSIONAL CIRCLE RENO, NV 89521		
Title: Name: Address: City-St-Zip:	D () Dele YOCKE, WILLIAM E 10375 PROFESSIO RENO, NV 89521	ERIC	Title: Name: Address: City-St-Zip:	DT (X) Change ( ) Addition YOCKE, WILLIAM ERIC 10375 PROFESSIONAL CIRCLE RENO, NV 89521		
Title: Name: Address: City-St-Zip:	D () Dele WELCH, MARTIN JA 10375 PROFESSIO RENO, NV 89521	ΑΥ	Title: Name: Address: City-St-Zip:	DP (X) Change ( ) Addition WELCH, MARTIN JAY 10375 PROFESSIONAL CIRCLE RENO, NV 89521		
Title: Name: Address: City-St-Zip:	( ) Dele	ete	Title: Name: Address: City-St-Zip:	S ( ) Change (X) Addition SMITH, DONALD CLARK 10375 PROFESSIONAL CIRCLE RENO, NV 89521		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD C. SMITH S 04/30/2009