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FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 802193 (3)

1. Corporation Name
ST. PAUL MERCURY INSURANCE COMPANY

Principal Place of Business
385 WASHINGTON ST
ST PAUL 2 MINNESOTA 55102

Mailing Address
385 WASHINGTON ST
ST PAUL 2 MINNESOTA 55102



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/13/1925

4. FEI Number
41-0881659

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 or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23

24 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

29 Zip

Country

30

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
CAPITOL BUILDING
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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DV
LISKA, P.J.
STREET ADDRESS 385 WASHINGTON ST.
CITY-ST-ZIP ST. PAUL MN

TITLE ☐ DELETE

NAME VT
SWANSON, D.J.
STREET ADDRESS 385 WASHINGTON ST.
CITY-ST-ZIP ST. PAUL MN

TITLE ☐ DELETE

NAME VS
BACKBERG, BRUCE A.
STREET ADDRESS 385 WASHINGTON STREET
CITY-ST-ZIP ST. PAUL MN

TITLE ☐ DELETE

NAME D
DALTON, H. E.
STREET ADDRESS 1115 ELWAY ST #418
CITY-ST-ZIP ST. PAUL MN

TITLE ☐ DELETE

NAME PD
THIELE, P.A.
STREET ADDRESS 385 WASHINGTON ST.
CITY-ST-ZIP ST. PAUL MN

TITLE ☐ DELETE

NAME S
GERBER, EDWARD M
STREET ADDRESS 385 WASHINGTON ST
CITY-ST-ZIP ST PAUL MN 55102

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 ☐ 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

385 Washington St.

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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: Edward M. Gerber

Edward M. Gerber 2411222 46121 212 7211

CR2E034 (10/97)