FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 19 AM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 803358 (1)

1. Corporation Name
THE AMERICAN INSURANCE COMPANY

Principal Place of Business	Mailing Address
777 SAN MARIN DR % CORP SECRETARY'S OFFICE NOVATO CA 94998	777 SAN MARIN DR % CORP SECRETARY'S OFFICE NOVATO CA 94998

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/16/1928
3a. Date of Last Report: 04/28/1994

2. Principal Place of Business (21): Suite, Apt. #, etc. (22); City & State (23); Zip (24); Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27); City & State (28); Zip (29); Country (30)

4. FEI Number: 22-0731810 ☐ 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

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

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL BLDG.
TALLAHASSEE FL 32399

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	1.1 TITLE	☐ Change ☐ Addition
NAME	JANET M. HOLLAND	1.2 NAME	
STREET ADDRESS	777 SAN MARIN DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NOVATO CA 94998	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	BLACK, GARY E.	2.2 NAME	
STREET ADDRESS	777 SAN MARIN DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NOVATO CA	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	MEYER, JOHN F	3.2 NAME	
STREET ADDRESS	777 SAN MARIN DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NOVATO CA	3.4 CITY-ST-ZIP	
TITLE	SVP	4.1 TITLE	☐ Change ☐ Addition
NAME	MARSH, HAROLD N III	4.2 NAME	
STREET ADDRESS	777 SAN MARIN DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	NOVATO CA 94998	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	WARREN, RICHARD G	5.2 NAME	
STREET ADDRESS	777 SAN MARIN DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NOVATO CA	5.4 CITY-ST-ZIP	
TITLE	SVP	6.1 TITLE	☐ Change ☐ Addition
NAME	SWANSON, THOMAS A	6.2 NAME	
STREET ADDRESS	777 SAN MARIN DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	NOVATO CA	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 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: Janet M. Holland 4/12/95 (415) 899-3621
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0481000 FP

8053558

THE AMERICAN INSURANCE COMPANY
(Subsidiary of Fireman's Fund Insurance Company)

PURPOSE: To engage in the insurance business.

DIRECTORS

Gary E. Black	David R. Pollard
Herbert F. Hansmeyer	Thomas E. Rowe
Timothy T.M. Koo	Joe L. Stinnette, Jr.
John F. Meyer	Edmund O. Wall *

ELECTED OFFICERS

Herbert F. Hansmeyer	Chairman of the Board
Joe L. Stinnette, Jr.	President and Chief Executive Officer
Timothy T.M. Koo	Executive Vice President
John F. Meyer	Executive Vice President and Chief Financial Officer
David R. Pollard	Executive Vice President
Thomas E. Rowe	Executive Vice President
Harold N. Marsh, III	Senior Vice President and Treasurer
Jeffrey H. Post	Senior Vice President & Actuary
Thomas A. Swanson	Senior Vice President, General Counsel & Corporate Secretary
Edmund O. Wall	Senior Vice President and Chief Administrative Officer
Richard G. Warren	Senior Vice President and Controller

APPOINTED OFFICERS

Janet M. Holland	Assistant Secretary

Business address: All of the above are located at 777 San Marin Drive, Novato, CA 9499 except as noted.

* Located at Home office address:
11516 Miracle Hills Drive, Omaha, NE 68154

03/15/95
C.S.O.