2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 804957

FILED May 01, 2002 8:00 AM Secretary of State

Entity Name: NORTHBROOK PROPERTY AND CASUALTY INSURANCE COMPANY

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
500 MADISON ST STE 2600 CHICAGO, IL 60661 US						
Current Mailing Address:			New Maili	New Mailing Address:		
385 WASHINGTON ST. ST. PAUL, MN 55102 US						
FEI Number: 36-2542404 FEI Number Applied For () FEI Num			umber Not Appl	nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
INSURANCE COMMISSIONER CAPITOL BUILDING TALLAHASSEE, FL 32304						
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.						
SIGNATURE:						
	Electror	nic Signature of Registered Agent			Date	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title:			Title:			
Name: Address: City-St-Zip:	CONROY, MIC 385 WASHING ST. PAUL, MN	TON ST.	Name: Name: Address: City-St-Zip:	DV (X) Change of MILLER, TIMOTHY M 385 WASHINGTON ST. ST. PAUL, MN 55102	() Addition	
Title: Name: Address: City-St-Zip:) Delete E, DOUGLAS W TON ST.	Title: Name: Address: City-St-Zip:	DPC (X) Change of FISHMAN, JAY S 385 WASHINGTON ST. ST. PAUL, MN	() Addition	
Title: Name: Address: City-St-Zip:	VS (BACKBERG, B 385 WASHING ST. PAUL, MN	TON ST.	Title: Name: Address: City-St-Zip:	()Change(() Addition	
Title: Name: Address: City-St-Zip:	VD (KLINGEL, STE 385 WASHING ST. PAUL, MN	TON ST.	Title: Name: Address: City-St-Zip:	()Change(() Addition	
Title: Name: Address: City-St-Zip:	V (BERGMANN, T 385 WASHING ST. PAUL, MN	TON ST	Title: Name: Address: City-St-Zip:	VT (X) Change of MCDONOUGH, PAUL H 385 WASHINGTON ST ST. PAUL, MN 55102	() Addition	
Title: Name: Address: City-St-Zip:	D (LAMENDOLA, I 385 WASHING ST. PAUL, MN	TON ST.	Title: Name: Address: City-St-Zip:	()Change(() Addition	
I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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						

SIGNATURE: BRUCE A BACKBERG VS 05/01/2002

above, or on an attachment with an address, with all other like empowered.