

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 805194 (8)

1. Corporation Name
MOTORS INSURANCE CORPORATION



Principal Place of Business: **THREE EXECUTIVE BLVD. P.O. BOX 944 YONKERS NY 10702**
Mailing Address: **3044 WEST GRAND BOULEVARD ANNEX 311 DETROIT MI 48202 US**

3. Date Incorporated or Qualified: **05/01/1949**
3a. Date of Last Report: **03/07/1995**
4. FEI Number: **38-0855585**
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

2. Principal Place of Business: **P. O. Box 940**
2a. Mailing Address: **MC 482-103-301**
21. Suite, Apt. #, etc.:
22. City & State:
23. Zip: Country:
24. Zip: Country:

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STATE INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE FL 32301**

81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83. City:
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: _____ (NOTE: Registered Agent Signature required when reinstating) _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	RINES, JOHN R	
STREET ADDRESS	3044 W GRAND BLVD.	
CITY - ST - ZIP	DETROIT MI	
TITLE	S	<input type="checkbox"/> DELETE
NAME	FALIK, JOSEPH L	
STREET ADDRESS	3031 W GRAND BLVD	
CITY - ST - ZIP	DETROIT MI	
TITLE	EVPD	<input type="checkbox"/> DELETE
NAME	NOLL, WILLIAM B	
STREET ADDRESS	3044 W GRAND BLVD.	
CITY - ST - ZIP	DETROIT MI	
TITLE	EVPD	<input type="checkbox"/> DELETE
NAME	REDMOND, DONALD P	
STREET ADDRESS	ONE NAT'L GENERALD PLAZA	
CITY - ST - ZIP	ST LOUIS MO	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	One National General Plaza
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	See Attached
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(k), 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: *C.L. Quenneville* **C.L. Quenneville, Ass't. Secretary 1/30/96**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: _____ Daytime Phone: _____

CR2E034 (12/95)

MOTORS INSURANCE CORPORATION

BOARD OF DIRECTORS

Richard J. S. Clout
Eric A. Feldstein
John D. Finnegan
Charles Froland
John E. Gibson
Michael E. Klehm
Carol J. Knorr
Leon J. Krain
Gregory E. Lau
R. Paul Maddock
William B. Noll
Donald P. Redmond
W. Allen Reed
John R. Rines
R. Charles Tschampion

ADDRESS

3044 West Grand Boulevard, Detroit, MI 48202
767 Fifth Avenue, New York, NY 10153
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OFFICERS

John R. Rines
Chairman of the Board
3044 West Grand Boulevard, Detroit, MI 48202

William B. Noll
Exec. Vice President &
Chief Financial Officer
3044 West Grand Boulevard, Detroit, MI 48202

Carol J. Knorr
Exec. Vice President
3044 West Grand Boulevard, Detroit, MI 48202

Donald P. Redmond
Exec. Vice President
One Nat'l General Plaza, St. Louis, MO 63166

John P. Boris
Vice President
3044 West Grand Boulevard, Detroit, MI 48202

Thomas D. Callahan
Vice President
3044 West Grand Boulevard, Detroit, MI 48202

Louis S. Carrio, Jr.
Vice President
3044 West Grand Boulevard, Detroit, MI 48202

Steven M. DiPeri
Vice President
6000 Midlantic Drive, Mt. Laurel, NJ 08054

Harvey Lippow
Vice President
3044 West Grand Boulevard, Detroit, MI 48202

Arturo M. Raschbaum
Vice President
6000 Midlantic Drive, Mt. Laurel, NJ 08054

Bernard J. Buselmeier
Vice President &
Treasurer
3044 West Grand Boulevard, Detroit, MI 48202

MOTORS INSURANCE CORPORATION

Joseph L. Falik
Secretary &
General Counsel

3031 West Grand Boulevard, Detroit, MI 48202

Assistant Secretaries:
Robert L. Donnay
Cathy L. Quenneville

3044 West Grand Boulevard, Detroit, MI 48202
3044 West Grand Boulevard, Detroit, MI 48202

1/19/96

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