

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 07, 2002 8:00 am**  
**Secretary of State**

02-07-2002 90180 035 \*\*\*150.00

UNIFORM BUSINESS REPORT

**DOCUMENT # 805194**  
 1. Entity Name  
**MOTORS INSURANCE CORPORATION**

|   |   |
|---|---|
| Principal Place of Business<br><b>300 GALLERIA OFFICENTRE<br/>         STE 200<br/>         SOUTHFIELD MI 48034<br/>         US</b> | Mailing Address<br><b>300 GALLERIA OFFICENTRE<br/>         STE 200<br/>         SOUTHFIELD MI 48034<br/>         US</b> |
|---|---|

|   |   |
|---|---|
| 2. Principal Place of Business<br>Suite, Apt. #, etc. | 3. Mailing Address<br>Suite, Apt. #, etc. |
| City & State  | City & State                              |
| Zip   | Country                                   |



DO NOT WRITE IN THIS SPACE

|  |  |
|--|--|
| 4. FEI Number<br><b>38-0855585</b>                           | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired<br><input type="checkbox"/> | \$8.75 Additional Fee Required                         |

|   |   |
|---|---|
| <b>6. Name and Address of Current Registered Agent</b><br><br><b>STATE INSURANCE COMMISSIONER<br/>         CAPITOL BUILDING<br/>         TALLAHASSEE FL 32301</b> | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code |
|---|---|

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

|  |   |  |
|--|---|--|
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> | <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2002 Fee will be \$550.00</b><br><b>Make Check Payable to Department of State</b> | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |
|--|---|--|

| 11. OFFICERS AND DIRECTORS                     |  | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |
|--|--|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>FINNEGAN, JOHN D</b><br><b>200 RENAISSANCE CENTER PO BOX 200</b><br><b>DETROIT MI 48265</b>     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S</b><br><b>QUENNEVILLE, CATHY L</b><br><b>200 RENAISSANCE CENTER PO BOX 200</b><br><b>DETROIT MI 48265</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PD</b><br><b>NOLL, WILLIAM B</b><br><b>300 GALLERIA OFFICENTRE STE 200</b><br><b>SOUTHFIELD MI 48034</b>    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>CD</b><br><b>MUIR, WILLIAM F</b><br><b>200 RENAISSANCE CENTER PO BOX 200</b><br><b>DETROIT MI 48265</b>     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VPT</b><br><b>DUNN, JOHN J JR</b><br><b>300 GALLERIA OFFICENTRE STE 200</b><br><b>SOUTHFIELD MI 48034</b>   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>GC</b><br><b>FALIK, JOSEPH L</b><br><b>300 GALLERIA OFFICENTRE STE 200</b><br><b>SOUTHFIELD MI 48034</b>    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *[Signature]* **REQUIRED** L. Donnay, Asst. Secretary 1-18-02 248-263-6900  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment  
DCA# 805194  
919666

MOTORS INSURANCE CORPORATION

BOARD OF DIRECTORS

William F. Muir, Chairman  
John D. Finnegan  
John E. Gibson  
Carol J. Knorr  
Gary Y. Kusumi  
William B. Noll

BUSINESS ADDRESS

200 Renaissance Center, Detroit, MI 48265  
200 Renaissance Center, Detroit, MI 48265  
200 Renaissance Center, Detroit, MI 48265  
300 Galleria Officentre, Southfield, MI 48034  
One GMAC Plaza, Earth City, MO 63045  
300 Galleria Officentre, Southfield, MI 48034

OFFICERS

President:

William B. Noll 300 Galleria Officentre, Southfield, MI 48034

Senior Vice Presidents:

John P. Boris 400 Galleria Officentre, Southfield, MI 48034  
Thomas D. Callahan 300 Galleria Officentre, Southfield, MI 48034  
Arturo M. Raschbaum 6000 Midlantic Drive, Mt. Laurel, NJ 08054

Vice Presidents:

Bernard J. Buselmeier One GMAC Plaza, Earth City, MO 63045  
Grover M. Edie 300 Galleria Officentre, Southfield, MI 48034  
Ronald M. Judd 150 Bath Road, Maidenhead, Berkshire, England SL6 4LB  
John W. Murdock 300 Galleria Officentre, Southfield, MI 48034  
Deborah M. Pfliegel 300 Galleria Officentre, Southfield, MI 48034

Vice President & Treasurer:

John J. Dunn, Jr. 300 Galleria Officentre, Southfield, MI 48034

Secretary:

Cathy L. Quenneville 200 Renaissance Center, Detroit, MI 48265

General Counsel:

Joseph L. Falik 300 Galleria Officentre, Southfield, MI 48034

Assistant Secretary:

Cynthia A. Miller 300 Galleria Officentre, Southfield, MI 48034  
Robert L. Donnay 300 Galleria Officentre, Southfield, MI 48034