


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90465 030 ***150.00

DOCUMENT # 807448
 1. Entity Name
PENN MILLERS INSURANCE COMPANY



Principal Place of Business Mailing Address
P.O. BOX P WILKES BARRE, PA 18773-0016 **P.O. BOX P WILKES BARRE, PA 18773-0016**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



04262006 Chg-P CR2E034 (11/05)

4. FEI Number **24-0686200** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 CHIEF FINANCIAL OFFICER
 P O BOX 6200 (32314-6200)
 200 E. GAINES ST
 TALLAHASSEE, FL 32399-0000

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BURKE, JACK L 72 N.FRANKLIN STREET,P.O.BOX P WILKES-BARRE, PA 187730016	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCTS BANKS, MIKE 72 N.FRANKLIN STREET,P.O.BOX P WILKES-BARRE, PA 187730016	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP SPENCER, BILL 72 N.FRANKLIN STREET,P.O.BOX P WILKES-BARRE, PA 187730016	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP ROBERTS, HAROLD 72 N.FRANKLIN STREET,P.O.BOX P WILKES-BARRE, PA 187730016	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Douglas A. Gaudet 72 n Franklin Street, P.O. Box P Wilkes-Barre, PA 18773-0016	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP Frank Joanelle 72 n Franklin Street, P.O. Box P Wilkes-Barre, PA 18773-0016	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Michael Berrini 72 n Franklin Street, P.O. Box P Wilkes-Barre, PA 18773-0016	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **4/27/06** **(570)822-8111**
 Date Daytime Phone #

ATTACHMENT

600 32321

#807 448

Penn Millers Insurance Company Officers
All at 72 N. Franklin Street, P. O. Box P Wilkes-Barre, PA18773-0016

Douglas A. Gaudet	President & CEO
Michael O. Banks	Executive VP, CFO, Treasurer & Secretary
Frank Joanlanne	Senior Vice President
Harold W. Roberts	Senior Vice President
Michael Berrini	Assistant Vice President
Jonathan Couch	Assistant Vice President
William Dine	Assistant Vice President
Patricia Staples	Assistant Vice President
Kevin Higgins	Vice President
Joseph Survilla	Vice President

ATTACHMENT

60032321

#807448

PENN MILLERS

BOARD OF DIRECTORS

<u>NAME</u>	<u>BUSINESS</u>	<u>RESIDENCE</u>
Heather M. Acker	Chief Financial Officer Gentex Corporation PO Box 315 324 Belmont Avenue Carbondale, PA 18407	PO Box 573 105 Stonegate Road Waverly, PA 18471
F. Kenneth Ackerman, Jr.	President Clark Consulting - Healthcare Group 225 S. 6 th St. Suite 1200 Minneapolis, Minnesota 55402	The Marquette Place 1314 Marquette Avenue Apt. #3001 Minneapolis, MN 55403
Dorrance R. Belin, Esq.	Oliver, Price & Rhodes 1212 South Abington Road P.O. Box 240 Clarks Summit, Pa. 18411	P.O. Box 53 Waverly, Pa. 18471
John L. Churnetski	1341 South Main Street Wilkes-Barre, Pa. 18706	129 Belfair Oaks Blvd. Bluffton, SC 29910
Douglas A. Gaudet	Penn Millers Insurance Co 72. N. Franklin Street P. O. Box P Wilkes-Barre, PA 18773-0016	325 Bulford Road Shavertown, PA 18708
Kim E. Michelstein	Independent Consultant 221 Joseph Drive Kingston, Pa. 18704	
Robert A. Nearing, Jr.	Vice President, Secretary & Treasurer Cochecton Mills 30 Depot Road Drawer 'A' Cochecton, New York 12726-5221	18 Crestmont Drive Honesdale, Pa. 18431

ATTACHMENT

William A. Ray

60032321

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58, rue Gounod
92210 Saint Cloud
France

James M. Revie

Chairman
S.A. Powell
(Address same as
Pipersville)

388 River Road
Bridge Three
Pipersville, Pa. 18947

J. Harvey Sproul, Jr.
(Chairman of the Board
of the Penn Millers Group)

President
H.B. Sproul Construction Co.
101 Center Street
P.O. Box 267
Clarks Summit, Pa. 18411

Linair Farms Road
P.O. Box 63
Waverly, Pa. 18471