

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Division of Corporations
Secretary of State

APPROVED
AND
FILED

95 MAR -1 PM 2:19

DOCUMENT # 807894 (1)

1. Corporation Name

OHIO FARMERS INSURANCE COMPANY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

ONE PARK CIRCLE
P.O. BOX 5001
WESTFIELD CENTER OH 44251-2001

Mailing Address

ONE PARK CIRCLE
P.O. BOX 5001
WESTFIELD CENTER OH 44251-2001

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/03/1949		3a. Date of Last Report 05/01/1994	
21		26		4. FEI Number 34-0438190		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No			
23		28					
Zip		Country		24		25	
29		30					

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	☐ Change ☐ Addition
NAME	BROICH, LARRY D	12 NAME	
STREET ADDRESS	8994 POMANDER DR	13 STREET ADDRESS	
CITY-ST-ZIP	WESTFIELD CENTER OH	14 CITY-ST-ZIP	
TITLE	VT	2.1 TITLE	☐ Change ☐ Addition
NAME	BOSSHARD, OTTO	22 NAME	
STREET ADDRESS	6666 GREENWICH RD	23 STREET ADDRESS	
CITY-ST-ZIP	WESTFIELD CENTER OH	24 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	DAUGHERTY, A KENT	32 NAME	
STREET ADDRESS	1095 SOUTHPORT DR	33 STREET ADDRESS	
CITY-ST-ZIP	MEDINA OH	34 CITY-ST-ZIP	
TITLE	PD	4.1 TITLE	☒ Change ☐ Addition
NAME	BLAIR, R C	42 NAME	
STREET ADDRESS	235 WALNUT DR	43 STREET ADDRESS	3382 Hardwood Hollow
CITY-ST-ZIP	MEDINA OH	44 CITY-ST-ZIP	
TITLE	VS	5.1 TITLE	☐ Change ☐ Addition
NAME	PICKERING, T.H.	52 NAME	
STREET ADDRESS	6711 MCWAY DRIVE	53 STREET ADDRESS	
CITY-ST-ZIP	WESTFIELD CENTER OH	54 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	Delete ☐ Change ☐ Addition
NAME	THOMPSON, ROBERT-H	62 NAME	
STREET ADDRESS	8808 CONCORD DR	63 STREET ADDRESS	
CITY-ST-ZIP	WESTFIELD CENTER OH	64 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 110.07(3)(4), Florida Statutes. I further certify 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: *Gary C. Gamble* Sr. Vice President Feb. 15, 1995 (216)887-0275

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gary C. Gamble

Date

Signature Press

OHIO FARMERS INSURANCE COMPANY

Addendum

Officers

G. C. Gamble
R. W. McManus
R. D. Sondles

John J. Adornetto
W. L. Boyer
R. A. Boyle
J. R. Chapman
B. R. Cochran

W. L. DeHaan
P. E. Ehret
W. G. Glazer
T. V. Grimm

B. A. Hochradel
W. W. Johnson
T. L. Kranstuber
E. Mandley
R. P. McQuattie
R. K. Niese, Jr.
H. L. Saltz, Jr.
E. A. Schaefer

L. J. Scott
D. B. Shumaker
D. L. Sides
G. M. Smith
G. G. Stahl
M. G. Van Eck

Sr. Vice President
Sr. Vice President
Sr. Vice President

Vice President
Vice President
Vice President
Vice President
Vice President
and Controller

[illegible]

2677 Star Lane, Wadsworth, OH 44281
204 Beth Drive, Seville, OH 44273
432 Wolf Avenue, Wadsworth, OH 44281

9423 Congress Road, Homerville, OH 44325
8799 North Leroy Road, Box 285, Westfield
9175 S. Leroy Road, Box 138, Westfield
241 Ryeland Circle, Medina, OH 44256
4646 North Ridge Road, Akron, OH 44313

6680 Arlington Drive, Box 214, Westfield Center, OH 44251
8794 Concord Drive, Box 664, Westfield Center, OH 44251
1140 Forest Glen Road, Westerville, OH 43081
487 Wolf Avenue Ext., Wadsworth, OH 44281
8809 North Leroy Road, Box 424, Westfield Center, OH 44251
8991 Pomander, Box 118, Westfield Center, OH 44251
455 Barrenwood Street, Wadsworth, OH 44281
5535 Smucker Drive, Box 195, Westfield Center, OH 44251
6600 Smucker Drive, Box 236, Westfield Center, OH 44251
602 South Court Street, Medina, OH 44256
3333 Woodhaven Lane, Medina, OH 44256
373 Brookpoint Circle, Wadsworth, OH 44281
553 Red Rock Drive, Wadsworth, OH 44281
3778 North Leroy Road, Box 83, Westfield Center, OH 44251
5700 Arlington Drive, Box 207, Westfield Center, OH 44251D.
7 Oakwood Drive, Box 14, Westfield center, OH 44251
1 Hartford Drive, Medina, OH 44256
54 Oakwood Drive, Box 104, Westfield Center, OH 44251
1134 Partridge Drive, Wadsworth, OH 44281

Eugene A. Buehler
David B. Jones
Richard H. LeSourd
Martin J. Murphy
John A. Root
Dale W. Smucker
Donald M. Wilder
Thomas E. Workman

1635 Linwood Drive, Wooster, OH 44691
9199 Deerfield Drive, Westfield Center, OH 44251
325 Winding Trail, Xenia, OH 45385
1101 Hillcreek Lane, Gates Mills, OH 44044
820 Lindenwood Lane, Medina, OH 44256
66605 Smucker Drive, Box 239, Westfield Center, OH 44251
46 Oakwood, Westfield Center, OH 44251
134 Ashbourne Road, Bexley, OH 43209