


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90072 030 ***150.00

DOCUMENT # 808487	
1. Entity Name STATE AUTO PROPERTY & CASUALTY INSURANCE COMPANY	

Principal Place of Business 112 S MAIN STREET GREER, SC 29650	Mailing Address 518 E BROAD STREET COLOMBUS, OH 43215 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40107471



05012007 Chg-P CR2E034 (12/06)

4. FEI Number 57-6010814		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

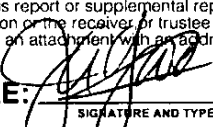
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PDC	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	RESTREPO, JR, ROBERT P		NAME				
STREET ADDRESS	518 E BROAD ST		STREET ADDRESS				
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP				
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	VCFO	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME	JOHNSTON, STEVEN J		NAME	English, Steven E.			
STREET ADDRESS	518 EAST BROAD STREET		STREET ADDRESS	518 East Broad Street			
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP	Columbus, OH 43215			
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	VS	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME	LOWTHER, JOHN R		NAME	Yano, James A.			
STREET ADDRESS	518 EAST BROAD STREET		STREET ADDRESS	518 East Broad Street			
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP	Columbus, OH 43215	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D'Antoni, David J.	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	D'ANTONI, DAVID J		NAME	15821 Savona Way			
STREET ADDRESS	8651 BLUE FLAG WAY		STREET ADDRESS	Naples, FL 34110			
CITY-ST-ZIP	NAPLES, FL 34109		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	HUESMAN, PAUL W		NAME				
STREET ADDRESS	7357 COLERIAN AVE		STREET ADDRESS				
CITY-ST-ZIP	CINCINNATI, OH 45239		CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				

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:  **James A. Yano** **5/1/07** **(614) 464-5000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

40107471
ATTACHMENT #808487

STATE AUTO PROPERTY AND CASUALTY INSURANCE COMPANY

NAMES ADDITIONAL OFFICERS

Steven R. Hazelbaker
VP
518 E. Broad Street
Columbus, Ohio 43215

Mark A. Blackburn
Senior VP
518 E. Broad Street
Columbus, Ohio 43215

James E. Duemey
VP and Investment Officer
518 E. Broad Street
Columbus, Ohio 43215

Joel E. Brown
VP
518 E. Broad Street
Columbus, Ohio 43215

Terrence P. Higerd
VP
518 E. Broad Street
Columbus, Ohio 43215

Noreen W. Johnson
VP
518 E. Broad Street
Columbus, Ohio 43215

Terrence L. Bowshier
VP
518 E. Broad Street
Columbus, Ohio 43215

Douglas E. Allen
VP
518 E. Broad Street
Columbus, Ohio 43215

John B. Melvin
VP
518 E. Broad Street
Columbus, Ohio 43215

Cathy B. Miley
VP
518 E. Broad Street
Columbus, Ohio 43215

Richard L. Miley
VP
518 E. Broad Street
Columbus, Ohio 43215

John M. Petrucci
VP
518 E. Broad Street
Columbus, Ohio 43215

Cynthia A. Powell
VP, Chief Accounting Officer, Treasurer
518 E. Broad Street
Columbus, Ohio 43215

Paul E. Nordman
VP
518 E. Broad Street
Columbus, Ohio 43215

David W. Dalton
VP
518 E. Broad Street
Columbus, Ohio 43215

Nancy D. Edwards
VP
518 E. Broad Street
Columbus, Ohio 43215

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Lorraine M. Siegworth
VP
518 E. Broad Street
Columbus, Ohio 43215

Mary Jean Reynolds
VP
518 E. Broad Street
Columbus, Ohio 43215

Larry D. Williams
VP
518 E. Broad Street
Columbus, Ohio 43215

NAMES ADDITIONAL DIRECTORS

Paul S. Williams
204 Springbrook Drive
Gahanna, OH 43230

S. Elaine Roberts
1440 N. James Road
Columbus, OH 43219

Richard K. Smith
7161 South Dune Highway
Empire, MI 49630

David R. Meuse
191 West Nationwide Blvd., Ste. 600
Columbus, OH 43215

Alexander B. Trevor
1987 My Tern Ct.
Sanibel, FL 33957