

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 808989

1. Entity Name

NORTHWESTERN NATIONAL CASUALTY COMPANY

FILED
Feb 03, 2000 8:00 am
Secretary of State

02-03-2000 90025 042 ***150.00

Principal Place of Business

18650 W CORPORATE DRIVE
BROOKFIELD WI 53045

Mailing Address

10370 RICHMOND AVENUE
HOUSTON TX 77042-4141

2. Principal Place of Business

3. Mailing Address

1000 Lenox Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Lawrenceville, NJ

4. FEI Number

39-6072958

Applied For

Not Applicable

Zip

Country

Zip

Country

08648

U.S.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COMMISSIONER OF INSURANCE
BILL NELSON
STATE CAPITOL
TALLAHASSEE FL 32304

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
BACHAND, CHARLES J
10370 RICHMOND AVE
HOUSTON TX 77042 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PCD
HAVERLAND, RICHARD M
1000 LENOX DRIVE
LAWRENCEVILLE NJ 08648 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PCD
Willis T. King, Jr.
1000 Lenox Drive
Lawrenceville, NJ 08648 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VT
HALLMAN, DWAYNE D
10370 RICHMOND AVE
HOUSTON TX 77042 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSD
GREENBERG, STEPHEN J.
1000 LENOX DR
LAWRENCEVILLE NJ 08648 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
KIBBLEHOUSE, STEPHEN L.
1000 LENOX DR.
LAWRENCEVILLE NJ 08648 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
DONALDSON, DAVID C
1000 LENOX DRIVE
LAWRENCEVILLE NJ 08648 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ 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:

Stephen L. Kibblehouse
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/20/00 (609) 895-3009

CR2E034 19/99