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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 809791

(7)

SAFECO INSURANCE COMPANY OF AMERICA

SAFECO PLAZA SEATILE WASHINGTON 88185 SAFECO PLAZA SEATILE WASHINGTON 88185 SAFECO PLAZA SEATILE WASHINGTON 88185 3. Date (incorporated or Qualified OS/06/1954 O2/28/1996 O5/06/1954 O5	D. C. C. L. DI.	1.6									
SEATILE WASHINGTON 88185 2. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated or Qualified DS/005/1954 2. Principal Place of Business 3. Date Incorporated or Qualified DS/005/1954 2. Principal Place of Business 3. Date Incorporated or Qualified DS/005/1954 2. Principal Place of Business 3. Date Incorporated or Qualified DS/005/1954 3. Date Incorporated or Status Deelerd DS/005/1954 3. Date Incorporated Status Deel	Principal Place of Business Mailing Address SAFFCO PLAZA SAFFCO PLAZA						, .marer .mili anire tarii (pmim 1914) 1181 31	011 01414 01011 C	MAIL EIBILL	11#14 4## 1	
2. Principal Fluce of Business 2a. Mailing Address 3. FEI Number Applied For A					3 5						
22							1 1			leport	
Suite, Apt #, etc. Suite	2. Principal F	Place of Business	2a. Mailing Ad	idress				111		pptied For	
Copy & State Copy	21	7 1 PT PT PT PT PT PT PT		26			91-0742148	Not Applicable			
City & State City & State City & State City & State Country Zip Z	–	#, etc					5. Certificate of Status Desired				
28 Country 29 Country 8. This corporation has biblilly for intengible tax under s. 199 032, P. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	te		e	·····		& Election Compaign Financing				
Zop	23		— `	→ '							
1	Zip	Country	Zip		Country	/		ntangible tax			
INSURANCE COMMISSIONER CAPTIOL BUILDING TALLAHASSEE FL 32301 82 Sureat 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 advances registered agent, or hosts, in the State of Florida, Such change was authorized by the corporation's board of ilrectors. I hereby accept the appointment as registered office or registered agent, or hosts, in the State of Florida, Such change was authorized by the corporation's board of ilrectors. I hereby accept the appointment as registered signer and for insulance with and accept the changing its registered signer and for insulance with and accept the changing its registered signer and antifering and the changing its registered signer against expanse required arthrapped agent appropriate approximation as registered signer against expanse required arthrapped agent approximation as registered agent against expanse required arthrapped agent against expanse required arthrapped agent against expanse required arthrapped agent against expanse against arthrapped agent against expanse required arthrapped agent against agains	24				30						
TALLAHASSEE FL 32301 82 Street Address (P.O. Box Number is Not Acceptable) 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 fits registered agent and the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent agent, are forth, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent, are forth appointment as registered agent agent agent, are forth appointment as registered agent a			rent Registered Agen	ıt	01	T No.	10. Name and Address of New Reg	Istered Age	nt		
TALLAHASSEE FL 32301 83					81	Name					
83 84 City FL 85 Zip Code					82	Street Add	dress (P.O. Box Number is Not Acceptabl	e)			
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered agent, or both, in the State of Hindrida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent to mile female with an accept the obligations of, Section 607 (505 f. Florida Statutes.) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. ITILE AS OFFICERS AND DIRECTORS IN 12 NAME EGAN, RAY M SAFECO PLAZA SEATTLE WA 14. STREET ADDRESS CITY-ST-2P THE OBD DELETE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. NAME SAFECO PLAZA 15. STREET ADDRESS CITY-ST-2P ON CLEAN, DAN D SAFECO PLAZA 25. STREET ADDRESS SAFECO PLAZA 32. NAME SAFECO PLAZA 32. SAFECO PLAZA 32. SAFECO PLAZA 32. SAFECO PLAZA 33. STREET ADDRESS SEATTLE WA 14. NAME CHAMAN, DONALD SREET ADDRESS SEATTLE WA 15. STREET ADDRESS SEATTLE WA 16. CITY-ST-2P OCHAMAN, DONALD SAFECO PLAZA 35. STREET ADDRESS SEATTLE WA 36. CITY-ST-2P DELETE 57. NAME SAFECO PLAZA 35. STREET ADDRESS SEATTLE WA 42. NAME SAFECO PLAZA 35. STREET ADDRESS SEATTLE WA 55. STREET ADDRESS SEATTLE WA 55. STREET ADDRESS SEATTLE WA 56. CITY-ST-2P OCHAMAN, DONALD SAFECO PLAZA 55. STREET ADDRESS SEATTLE WA 56. STREET ADDRESS SEATTLE WA 56. STREET ADDRESS SAFECO PLAZA 56. STREET ADDRESS	IALL	LATINGGEE FL 32301			83						
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 fits registered algent, 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, 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 and accept the obligations of, Section 607 (505. Florida Statutes. SIGNATURE 2.											
11. Pussant to the provisions of Sections 607 0502 and 607 1508. Fiorida Statutes, the above-named corporation submits this statement for the purpose of Changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE 12.					84	City		FI ⁸	JS Zip	Code	
AS OFFICERS AND DIFFECTORS IN 12 NAME SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 23 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 34 CITY-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 32 MANE SIREET ADDRESS OFTI-ST-2P THE WAS AFECO PLAZA 33 STREET ADDRESS SAFTLE WA 34 CITY-ST-2P THE WAS AFECO PLAZA 35 STREET ADDRESS SAFTLE WA 35 STREET ADDRE	11. Pursuant	to the provisions of Sections 607 (0502 and 607, 1508, Fig	orida Statute:	s, the abov	e-named cor	poration submits this statement for the pu	roose of ch	anging i	ts registered	
SIGNATURE	office or i	registered agent, or both, in the St	iale of Florida. Such ch	ange was au	rthorized b	v the corpora	ation's board of directors. I hereby accep-	the appoint	ment as	registered	
Styrutor, Jupied is provided any edition of stering agreements (NOTE Pegostered Agent agreement prequired when introducing) DATE	SIGNATURE	,									
TITLE				(NOTE.	Registered Ag	ent signature requ					
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18. THE DELETY CERTIS HAT THE INTERTION SHIPPING WITH THE THIRD CODE OUT CHARLE TO THE EVENTS OF THE VACABOA 110 D7/19/11. Clouds Statutos 1 for the section that the							di- 0				
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 i	in Block 12 or Biock 13 if changed	l, or on an attachment i	with an addre	ess.	,		,			

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR