

2005

# NON PROFIT CORPORATION ANNUAL REPORT


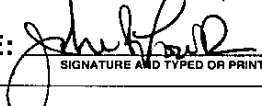
**FILED**  
**Apr 12, 2005 8:00 am**  
**Secretary of State**

04-12-2005 90143 023 \*\*\*150.00

20029228



02242005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # 810269</b>					
1. Entity Name STATE AUTOMOBILE MUTUAL INSURANCE COMPANY					
Principal Place of Business 518 E. BROAD ST. COLUMBUS, OH 43215-3901			Mailing Address 518 E. BROAD ST. COLUMBUS, OH 43215-3901		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 31-4316080	
				<input type="checkbox"/> 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		
CT COPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City <b>FL</b> 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: _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	JOHNSTON, STEVEN J		NAME		
STREET ADDRESS	518 E BROAD ST		STREET ADDRESS		
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HARRIS, URLIN G JR.		NAME		
STREET ADDRESS	7585 PERRY ROAD		STREET ADDRESS		
CITY-ST-ZIP	DELAWARE, OH 43015		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LOWTHER, JOHN R.		NAME		
STREET ADDRESS	518 E BROAD ST		STREET ADDRESS		
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	POWELL, CYNTHIA A		NAME		
STREET ADDRESS	2204 STRATINGHAM		STREET ADDRESS		
CITY-ST-ZIP	DUBLIN, OH 43017		CITY-ST-ZIP		
TITLE	PDC	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MOONE, ROBERT H		NAME		
STREET ADDRESS	518 E BROAD ST		STREET ADDRESS		
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BLACKBURN, MARK A		NAME		
STREET ADDRESS	518 E. BROAD STREET		STREET ADDRESS		
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP		
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		John R. Lowther		4-1-05 (614) 464-5000	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

ATTACHMENT

20029928  
#810269

STATE AUTOMOBILE MUTUAL INSURANCE COMPANY

NAMES ADDITIONAL OFFICERS

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

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

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

William D. Hansen  
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

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

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

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

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**NAMES ADDITIONAL DIRECTORS**

Michael F. Dodd  
518 E. Broad Street  
Columbus, Ohio 43215

Paul J. Otte  
201 S. Grant Avenue  
Columbus Ohio 43215

Dennis R. Blank  
477 S. Front Street  
Columbus, Ohio 43215

Marsha P. Ryan  
One Riverside Plaza  
Columbus, Ohio 43215

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

Gerald L. Bepko  
530 W. New York Street  
Indianapolis, Indiana 46202

Michael J. Fiorile  
770 Twin Rivers Drive  
Columbus, Ohio 43215