

**2006 NON PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90151 007 ***150.00

DOCUMENT # 810269

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**

50012220



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04052006 Chg-P CR2E034 (11/05)

City & State
Zip Country

4. FEI Number
31-4316080
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399**

7. Name and Address of New Registered Agent

Name
CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Rd.
City **Plantation** FL Zip Code **33324**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> Delete
NAME	JOHNSTON, STEVEN J	
STREET ADDRESS	518 E BROAD ST	
CITY-ST-ZIP	COLUMBUS, OH 43215	
TITLE	D	<input type="checkbox"/> Delete
NAME	HARRIS, URLIN G JR.	
STREET ADDRESS	7585 PERRY ROAD	
CITY-ST-ZIP	DELAWARE, OH 43015	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LOWTHER, JOHN R.	
STREET ADDRESS	518 E BROAD ST	
CITY-ST-ZIP	COLUMBUS, OH 43215	
TITLE	V	<input type="checkbox"/> Delete
NAME	POWELL, CYNTHIA A	
STREET ADDRESS	2204 STRATINGHAM	
CITY-ST-ZIP	DUBLIN, OH 43017	
TITLE	PDC	<input checked="" type="checkbox"/> Delete
NAME	MOONE, ROBERT H	
STREET ADDRESS	518 E BROAD ST	
CITY-ST-ZIP	COLUMBUS, OH 43215	
TITLE	D	<input type="checkbox"/> Delete
NAME	BLACKBURN, MARK A	
STREET ADDRESS	518 E. BROAD STREET	
CITY-ST-ZIP	COLUMBUS, OH 43215	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PDC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Restrepo, Jr., Robert P.	
STREET ADDRESS	518 E. Broad St.	
CITY-ST-ZIP	Columbus, OH 43215	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: John R. Lowther
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-06
Date

(614) 464-5000
Daytime Phone #

ATTACHMENT

500/2220
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

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

ATTACHMENT

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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

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

Roger P. Sugarman
1800 Capitol Square
65 East State Street, 18th Floor
Columbus, Ohio 43215

Dwight E. Smith
2191 City Gate Drive
Columbus, Ohio 43219