

2000 UNIFORM BUSINESS REPORT (UBR)

8/8/00-90005-014-\$150.00-\$150.00

1044

DOCUMENT # 812115

1. Entity Name
AMERICAN COMMERCE INSURANCE COMPANY

R

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP 15 PM 2:43

Principal Place of Business
3590 TWIN CREEKS DRIVE
COLUMBUS OH 43204

Mailing Address
3590 TWIN CREEKS DRIVE
COLUMBUS OH 43204



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **31-4361173**

Applied For
Not Applicable

Zip Country

Zip Country

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

**INSURANCE COMMISSIONER
CAPITOL
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.

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	T ANDERSON, CURT C 3590 TWIN CREEKS DR COLUMBUS OH <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T O'Hara, Richard 3590 Twin Creeks Dr Columbus, OH 43214 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC WILKINS, F. STUART 3590 TWIN CREEKS DR COLUMBUS OH <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Deley-Shimer, Julie 3590 Twin Creeks Dr Columbus, OH 43214 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BERRIDGE, THOMAS E. 3590 TWIN CREEKS DR COLUMBUS OH <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Clark, Greg 3590 Twin Creeks Dr Columbus, OH 43214 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOGAN, GERALD P 3590 TWIN CREEKS DR COLUMBUS OH 43204 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TIMBROOK, THOMAS E. 3590 TWIN CREEKS DR COLUMBUS OH <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLAINE, CAROL R. 3590 TWIN CREEKS DR COLUMBUS OH 43204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (5/00)

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: **SIGNATURE REQUIRED** *[Signature]* **9/14/00** **614-272-6987**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

American Commerce Insurance Company
Insuring AAA Members since 1946

3590 Twin Creeks Drive
P.O. Box 182579
Columbus, Ohio 43218-2579
614-272-6951

Attachment #812115 0076716
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Additional Directors

Title	D
Name	Patrick William Doherty
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Terry Robert Farias
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Gerald Fels
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Roger Lee Graybeal
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Richard S Hamilton
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Charles Liekweg
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Gerald P Hogan
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	James McDowell
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

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Additional Directors

Title	D
Name	Peter Ohlheiser
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Regan Remillard
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Thomas Rowles
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

Title	D
Name	Mark Shaw
Street Address	3590 Twin Creeks Dr
City, St, Zip Code	Columbus, OH 43214

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Attachment # 812115 DU076716

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July 26, 2000

Uniform Business Report
PO Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

I just received your second request for our 2000 Uniform Business Report. This was the first indication that you had not received the form and check that was mailed on April 20, 2000. I checked with our bank and confirmed that the check in the amount of \$150.00 never cleared. I am resending the information that you require and requesting that the additional fee be waived. If there are any questions, please contact me at 614-272-6951 ext. 429.

Sincerely,



Kim Nestor
Accountant

Enclosures (3)