FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 21 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **812455** **(4)**

1. Corporate Name

INTEGON INDEMNITY COMPANY

Principal Place of Business	Mailing Address
500 WEST FIFTH STREET P.O.BOX 3199 WINSTON-SALEM NC 27152-0199	500 WEST FIFTH STREET P.O.BOX 3199 WINSTON-SALEM NC 27102-3199 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/08/1958	3a. Date of Last Report: 05/01/1994
4. FEI Number: 56-0473714	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24: 27102-3199 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
INSURANCE COMMISSIONER THE CAPITOL TALLAHASSEE FL	81 Name 82 Street 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 above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	11 TITLE	V	☒ Change ☐ Addition
NAME	VISINTINE, GERALD R.	12 NAME		
STREET ADDRESS	500 W. FIFTH ST.	13 STREET ADDRESS		
CITY-ST-ZIP	WINSTON-SALEM NC	14 CITY-ST-ZIP		
TITLE	VP	21 TITLE	V	☒ Change ☐ Addition
NAME	MATTOCKS JR., NOLAND R.	22 NAME		
STREET ADDRESS	500 W. FIFTH STREET	23 STREET ADDRESS		
CITY-ST-ZIP	WINSTON-SALEM NC	24 CITY-ST-ZIP		
TITLE	VD	31 TITLE		☐ Change ☐ Addition
NAME	VENABLE, CHARLES H.	32 NAME	DELETE	
STREET ADDRESS	500 W. FIFTH ST.	33 STREET ADDRESS		
CITY-ST-ZIP	WINSTON-SALEM NC	34 CITY-ST-ZIP		
TITLE	VSD	41 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, JOHN J	42 NAME		
STREET ADDRESS	500 W. FIFTH ST.	43 STREET ADDRESS		
CITY-ST-ZIP	WINSTON-SALEM NC	44 CITY-ST-ZIP		
TITLE	PD	51 TITLE		☐ Change ☐ Addition
NAME	LAMBIE, JAMES T	52 NAME		
STREET ADDRESS	500 W. FIFTH ST.	53 STREET ADDRESS		
CITY-ST-ZIP	WINSTON-SALEM NC	54 CITY-ST-ZIP		
TITLE	VD	61 TITLE		☐ Change ☐ Addition
NAME	LYON, ARTHUR S. JR.	62 NAME		
STREET ADDRESS	500 W. FIFTH ST.	63 STREET ADDRESS		
CITY-ST-ZIP	WINSTON-SALEM NC	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: N. Randolph Mattocks, Jr. 4/12/95 (910) 770-2218
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

04/21/95 PM

812455

1995 Corporation Annual Report

Integon Indemnity Corporation
Document # 812455

13. Additions/Changes to Officers and Directors:

V/D
ANDREWS, STEVEN C.
500 W. FIFTH ST.
WINSTON-SALEM, NC

V/D
DILLON, DAVID A.
500 W.FIFTH ST.
WINSTON-SALEM, NC

V
DURKEE, LANCE D.
500 W. FIFTH ST.
WINSTON-SALEM, NC

V/D
EMERSON, BERTRAND M., II
500 W. FIFTH ST.
WINSTON-SALEM, NC

V
GUNTNER, BARBARA A.
3060 S. CHURCH ST.
BURLINGTON, NC

V
KERNODLE, SETH E.
500 W. FIFTH ST.
WINSTON-SALEM, NC

V/D
MARTIN, ANDREW P.
500 W. FIFTH ST.
WINSTON-SALEM, NC

V
PORCARI, JAMES A., III
500 W. FIFTH ST.
WINSTON-SALEM, NC

AT (Assistant Treasurer)
RUSSELL, SHERRILL D.
500 W. FIFTH ST.
WINSTON-SALEM, NC
(There is no appointed
Treasurer at this time.)

V
SPRAY, GREGORY L.
3060 S. CHURCH ST.
BURLINGTON, NC

V
TWOMBLY, TERRY E.
500 W. FIFTH ST.
WINSTON-SALEM, NC

A12/IND-FL/pt