

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1-3

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 817508 (5)

1. Corporation Name

AMERICAN PROTECTION INSURANCE COMPANY



Principal Place of Business

1 KEMPER DR.
LONG GROVE IL 60049-0001
US

Mailing Address

1 KEMPER DR.
LONG GROVE IL 60049-0001
US

3. Date Incorporated or Qualified

11/27/1963

3a. Date of Last Report

04/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

4. FEI Number

36-2763106

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

10. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL
MIAMI, FL
TALLAHASSEE FL 32304

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

Signature typed or printed in Block 12 or 13 of this application

NOTE: Registered Agent Signatures must be notarized

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S
NAME CONWAY, J K
STREET ADDRESS 1 KEMPER DRIVE
CITY-ST-ZIP LONG GROVE IL ☒ DELETE

11 TITLE S&GEN COUNSEL
12 NAME CONWAY, J.K. ☒ Change ☐ Addition
13 STREET ADDRESS 6211 NORTH KNOX
14 CITY-ST-ZIP CHICAGO, IL 60646

TITLE VD
NAME WHITE, W. L. ☐ DELETE
STREET ADDRESS 144 LINCOLN PARKWAY
CITY-ST-ZIP CRYSTAL LAKE IL

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE P
NAME SIMMONS, W E ☐ DELETE
STREET ADDRESS 4614 VALERIE DR
CITY-ST-ZIP CRYSTAL LAKE IL

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE VD
NAME STANBRIDGE, P T ☒ DELETE
STREET ADDRESS 910 RUB OF GREEN LANE
CITY-ST-ZIP BARRINGTON, IL 00000

41 TITLE EVD
42 NAME MATHIS, D.B. ☐ Change ☒ Addition
43 STREET ADDRESS 529 BRIAR LANE
44 CITY-ST-ZIP LAKE FOREST, IL 60045

TITLE T
NAME STACY, R.B. ☐ DELETE
STREET ADDRESS 15149 W. CLOVER LANE
CITY-ST-ZIP LIBERTYVILLE IL

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE D
NAME FRITZ, BRUCE N. ☐ DELETE
STREET ADDRESS 7719 OAKRIDGE CT.
CITY-ST-ZIP CRYSTAL LAKE IL

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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)(k), 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:

R.B. STACY, TREAS.

7-10-96

(847) 320 - 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Display Phone #

CR2E034 (12/95)

817508

5/29/96 2-3

AMERICAN PROTECTION INSURANCE COMPANY

(An Illinois Corporation)
 Incorporated June 12, 1962
 (A Subsidiary of LMC)

DIRECTORS

Bruce N. Fritz
 James S. Kemper III
 David B. Mathis
 Peter M. Mooney
 Robert A. Lindemann
 William E. Simmons
 Robert L. Smialek
 Walter L. White

EXECUTIVE COMMITTEE

James S. Kemper III, Chairman
 Robert L. Smialek
 Walter L. White

(Any director an alternate)

CORPORATE OFFICERS
 (Elected)

J. S. Kemper III	Chairman
R. L. Smialek	Chief Executive Officer
W. E. Simmons	President
D. B. Mathis	Executive Vice President
J. V. Costello	Vice President
F. L. Deacon	Vice President
L. P. Frascotti	Vice President
R. M. Hiltz	Vice President
P. M. Mooney	Vice President
T. P. Murphy	Vice President
R. B. Nielsen	Vice President
R. J. Vitalone	Vice President
P. T. Walton	Vice President
T. D. Weaver	Vice President
W. L. White	Vice President
J. K. Conway	General Counsel and Secretary
R. B. Stacy	Treasurer
R. E. Greco	Actuary

*New

**CORPORATE OFFICERS
(Appointed)**

W. P. Thomas, Jr.	HPR Education & Research Officer
R. A. Garwood	Rate Making Officer
J. W. Johnson	Rate Making Officer
D. B. Lillquist	Rate Making Officer
N. A. Peterson	Assistant Reinsurance Secretary
M. J. Stella	Associate Reinsurance Secretary
R. A. Brady	Resident Secretary