

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90319 002 ***150.00

0649225 AT

DOCUMENT # 821403

1. Entity Name
DAIMLERCHRYSLER INSURANCE COMPANY



Principal Place of Business
27777 FRANKLIN ROAD
P.O. BOX 5168
SOUTHFIELD MI 48036-2168

Mailing Address
1000 CHRYSLER DR.
TAX AFFAIRS, CMS 485-12-30
AUBURN HILLS MI 48326-2766
US



2. Principal Place of Business
27777 Inkster Rd.
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.
Tax Affairs, CMS: 485-12-30

☒ CHECK HERE IF MAKING CHANGES

City & State
Farmington Hills, MI
Zip
48334
Country
USA

City & State
Zip
Country

4. FEI Number **38-1775863**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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. 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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVP DTKSTRA, T.P. 1000 CHRYSLER DRIVE AUBURN HILLS MI 48326-2766	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AC LATHAM, P.H. 1000 CHRYSLER DRIVE AUBURN HILLS MI 48326-2766	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HACKMAN, T.L. 27777 FRANKLIN ROAD SOUTHFIELD MI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCALGAR, T.C. 27777 FRANKLIN ROAD SOUTHFIELD MI 48034	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROBISON, K.J. 27777 FRANKLIN ROAD SOUTHFIELD MI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPC OLSEN, D.H. 27777 FRANKLIN ROAD SOUTHFIELD MI 48034	<input type="checkbox"/> Delete

**SCHEDULE
ATTACHED**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

REQUIRED **R.J. Vanderbeck** **4/28/03** **248 512-3071**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment
90114299
821403
DaimlerChrysler Insurance Company
(Michigan)

		<u>Date Elected or Appointed</u>
Officers:	L. J. Biskner, III	Vice President 04-25-91
	M. J. Dodge	Vice President 01-31-01
	T. P. Dykstra	Vice President and Treasurer 08-18-99
	J. S. Haan	Assistant Controller and Assistant Treasurer and Vice President 08-18-99
	T. L. Hackman	Secretary 07-17-01
	P. E. Knauss	Chairman of the Board, President and Chief Executive Officer 01-01-96
	P. H. Latham	Assistant Controller 11-14-02
	N. Meder	Vice President and Controller 06-01-86
	D. H. Olsen	Vice President and Chief Financial Officer 10-06-00
	S. C. Poling	Assistant Secretary 10-01-98
	K. J. Robison	Vice President 09-25-00
	S. E. Roegner	Assistant Controller 12-13-94
	J. J. Shea	Assistant Treasurer 09-01-02
	P. Silvestri	Assistant Treasurer 08-01-02
	R. J. Vanderbeek	Assistant Controller 06-17-02
		09-01-02
Directors:	G. L. Beverman	06-17-02
	K. R. Cunningham	12-13-02
	J. S. Haan	07-15-98
	P. E. Knauss	11-14-02
	M. A. Manzo	06-17-02
	N. Meder	10-06-00
	D. H. Olsen	04-22-99
	M. A. Schmid	01-01-00
	C. A. Taravella	01-06-97
Stockholder:	DaimlerChrysler Services North America LLC	
Authorized Capital:	1,000,000 shares of common stock - par value \$5.00 per share. All shares have been issued and are outstanding.	
Incorporated:	December 30, 1964 (as Car City Insurance Company; name changed to Chrysler Insurance Company on November 8, 1972; name changed to DaimlerChrysler Insurance Company (debis) North America on June 30, 2000; name changed to Chrysler Insurance Company on November 6, 2000; name changed to DaimlerChrysler Insurance Company on June 30, 2001)	
Authorized to do Business:	All States, the District of Columbia, Canada, and all Provinces of Canada	
Annual Meeting:	Fourth Thursday in April	
Head Office:	27777 Inkster Road, Farmington Hills, Michigan 48334	