## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 824634**

Title:

Name:

Address:

Entity Name: PETROLEUM CASUALTY COMPANY

FILED Apr 13, 2009 Secretary of State

•					
Current Pr	incipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
4550 DACOMA ST HOUSTON, TX 770928614 US			4550 DACOMA ST CORP-BH4-1163C HOUSTON, TX 770926		
Current Ma	ailing Addres	s:	New Mailing Address	New Mailing Address:	
4550 DACOMA ST HOUSTON, TX 770928614 US			4550 DACOMA ST CORP-BH4-1163C HOUSTON, TX 77092		
FEI Number:	74-0832710	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 US					
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:					
	Electron	ic Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD () KRAHULIK, WIL 5959 LAS COLI IRVING, TX 750	NAS BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () KIYFES, ANDRI 3225 GALLOWS FAIRFAX, VA 2	S ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () LOWRY, ARTHU 5959 LAS COLI IRVING, TX 750	NAS BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GIL A. DEEL AS 04/13/2009

( ) Delete

DEEL, GILBERTA A

City-St-Zip: TOMBALL, TX 77375

12615 HAMMERSMITH

() Change () Addition