2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# 826055

Entity Name: THE NAVIGATORS

Current Principal Place of Business:

3820 N 30TH ST
COLORADO SPRINGS, CO 80904

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6000
ATTN: CORPORATE AFFAIRS
COLORADO SPRINGS, CO 80934

New Mailing Address:

FEI Number: 84-6007896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAWES, DAVE
4306 DEEPWATER LANE
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: WHITE, JERRY E
Address: 762 GREY EAGLE CIRCLE S
City-St-Zip: COLORADO SPRINGS, CO 80919

Title: PCEO ( ) Delete
Name: ANDREWS, ALAN K
Address: 2735 TARTAN LANE
City-St-Zip: COLORADO SPRINGS, CO 80920

Title: VCFO ( ) Delete
Name: WEEKS, W. ANDREW JR
Address: 6406 DEWSBURY DR
City-St-Zip: COLORADO SPRINGS, CO 80918

Title: VCOO ( ) Delete
Name: LIBBY, LAUREN D
Address: 6166 DEL PAZ DR
City-St-Zip: COLORADO SPRINGS, CO 80918

Title: T ( ) Delete
Name: NEUMANN, LEON A
Address: 3915 JASMINE ST
City-St-Zip: COLORADO SPRINGS, CO 80907

Title: AT ( ) Delete
Name: BRESSLER, PETER S A. TRES
Address: 5660 COACHWOOD TRAIL
City-St-Zip: COLORADO SPRINGS, CO 80919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PCEO (X) Change ( ) Addition
Name: NUENKE, DOUG
Address: 8055 CHANCELLOR DR
City-St-Zip: COLORADO SPRINGS, CO 80920

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VCOO (X) Change ( ) Addition
Name: DANOS, GARRETT
Address: 15545 E MAIN STREET
City-St-Zip: CUT OFF, LA 70345

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER BRESSLER AT 01/13/2009
Electronic Signature of Signing Officer or Director — Date