2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT #: · 827115 May 11, 2000 8:00 am Secretary of State 1. Entity Name **ARGONALTXINSURANCE COMPANY**X Argonaut-Midwest Insurance Compa 05-11-2000 90316 028 ***150.00 Principal Place of Business Mailing Address AUDDI FFIFI D. RD 250 MIDDLEFIELD RD PARK CALIFORNIA 94025 MENLO PARK CALIFORNIA 94025-3560 2. Principal Place of Business 3. Mailing Address 8750 W. Bryn Mawr Ave Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 1300 City & State City & State 4. FEI Number Applied For <u>Chićago, IL</u> 36-2489372 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 60631 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FLORIDA INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) CAPITOL BLDG. TALLAHASSEE FL 32304 Zip Code FL 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. 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 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. **TSVP** TITLE ☐ Delete CR2E034 (9/99 TITLE Change ☐ Addition HALLIDAY, JAMES B. NAME NAME STREET ADDRESS 250 MIDDLEFIELD ROAD STREET ADDRESS CITY-ST-ZIP MERLO PARK CA CITY-ST-ZIP TITLE Lx Defete Change TITLE Addition CHARLES E. RINSCH NAME NAME Mark E. Watson III STREET ADDRESS 250 MIDDLEFIELD ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MENLO PARK CA TITLE ☐ Delete TITLE Change ☐ Addition NOLAN, J. MICHAEL NAME NAME 250 MIDDLEFIELD ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MENLO PARK CA CITY-ST-ZIP THTLE ☐ Delete ☐ Change ☐ Addition V PPA NAME Ellen M. Gardiner STREET ADDRESS STREET ADDRESS 250 Middlefield Road CITY-ST-ZIP CITY-ST-ZIP wenlo Park, CA TITLE ☐ Delete TITLE Change ☐ Addition KISLER, DENNIS B. NAME NAME STREET ADDRESS 250 MIDDLEFIELD ROAD STREET ADDRESS CITY-ST-ZIP MEMLO PARK CA CITY-ST-ZIP Mellin, Randall J XX Delete AITLE Change Addition NÂME 250 Middlerield Rd, STREET ADDRESS STREET ADDRESS Menlo Park, CA 94025 CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Dennis B. Kisler, Vice President

Date

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00

- Daytime Phone #