

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90371 005 ***150.00

DOCUMENT # 827115

1. Entity Name
ARGONAUT-MIDWEST INSURANCE COMPANY



Principal Place of Business
**225 WEST WASHINGTON ST
6TH FLOOR
CHICAGO, IL 60606**

Mailing Address
**10101 REUNION PL.
STE. 500
SAN ANTONIO, TX 78216**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04212008

Chg-P

CR2E034 (12/06)

4. FEI Number

36-2489372

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TSVP ☒ Delete
NAME HAUSHILL, MARK W
STREET ADDRESS 10101 REUNION PL. STE. 500
CITY-ST-ZIP SAN ANTONIO, TX 78216

TITLE TV ☐ Change ☒ Addition
NAME Zwinggi, Janice W.
STREET ADDRESS 10101 REUNION PL. STE 500
CITY-ST-ZIP SAN ANTONIO, TX 78216

TITLE C ☐ Delete
NAME WATSON, MARK E III
STREET ADDRESS 10101 REUNION PLACE STE. 500
CITY-ST-ZIP SAN ANTONIO, TX 78216

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Delete
NAME JEANS, THOMAS B
STREET ADDRESS 225 WEST WASHINGTON ST
CITY-ST-ZIP CHICAGO, IL 60606

TITLE P ☐ Change ☒ Addition
NAME Arledge, Michael E.
STREET ADDRESS 10101 REUNION PL. STE 500
CITY-ST-ZIP SAN ANTONIO, TX 78216

TITLE VS ☐ Delete
NAME COMEAUX, CRAIG S
STREET ADDRESS 10101 REUNION PLACE SUITE 500
CITY-ST-ZIP SAN ANTONIO, TX 78216

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE COO ☒ Delete
NAME VEZZOSI, GREGORY
STREET ADDRESS 10101 REUNION PLACE SUITE 500
CITY-ST-ZIP SAN ANTONIO, TX 75216

TITLE V ☐ Change ☒ Addition
NAME COTTER, Daniel A.
STREET ADDRESS 225 W. WASHINGTON ST.
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 information empowered.

SIGNATURE:

Evan Hill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/08

Date

Daytime Phone #