

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90037 007 ***150.00

UBR-2002 AIR

DOCUMENT # 827926

1. Entity Name

RLI INSURANCE COMPANY

Principal Place of Business

**9025 N LINDBERGH DR
 PEORIA IL 61615**

Mailing Address

**9025 N LINDBERGH DR
 PEORIA IL 61615**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

37-0915434

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

**INSURANCE COMMISSIONER
 THE CAPITOL
 TALLAHASSEE FL 32304**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	STEPHENS, GERALD D	
STREET ADDRESS	493 E HIGH POINT DR.	
CITY-ST-ZIP	PEORIA IL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	QUINE, MICHAEL E.	
STREET ADDRESS	12348 COVE COURT	
CITY-ST-ZIP	DUNLAP IL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DONDANVILLE, JOSEPH E	
STREET ADDRESS	1102 W BROOKFOREST	
CITY-ST-ZIP	PEORIA IL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	MICHAEL, JONATHAN E.	
STREET ADDRESS	12706 GEORGETOWN	
CITY-ST-ZIP	DUNLAP IL	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	HENSEY, KIM J.	
STREET ADDRESS	111 W. MERLE LANE	
CITY-ST-ZIP	PEORIA IL	
TITLE	T	<input type="checkbox"/> Delete
NAME	MICHAEL A PRICE	
STREET ADDRESS	528 W WOLF ROAD	
CITY-ST-ZIP	PEORIA IL	

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

SEE ATTACHED CONTINUATION

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.

SIGNATURE:

Jean M. Stephenson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jean M. Stephenson 01/09/02 (309) 692-1000

Asst. Sec.

Date

Daytime Phone #

ext. 5397

CFR2E034 (9/01)

RLI Insurance Company
2002 Uniform Business Report

Attachments

~~827926~~
410139

Continuation of Questions 11 and 12

TITLE	NAME	STREET ADDRESS	CITY/STATE
PD	Michael J. Stone	460 E. High Point Rd.	Peoria, IL
VD	Thomas V. Warthen	6201 N. Pin Oak Circle	Peoria, IL
V/Gen Couns.	Mary Beth Nebel	5130 W. Ancient Oak Dr.	Peoria, IL
Asst. Sec.	Jean M. Stephenson	1104 W. Greenfield Dr.	Peoria, IL