FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

 PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 829700

1. Corporation Name

FAMEX, INC.

Principal Place of Business Mailing Address				•		((65/4) 15/14 118/8 18/11 184/1)1 6 11 6 19	
777 SAN MARIN DR 777 SAN MARIN DR					}					
	ETARY'S OFFICE		% CORP SECRETARY'S OFFICE			DO NOT WELL	re ini THIS	SDACE	;	
NOVATO CA 94	998	NOVATO CA 94998	NOVATO CA 94998		}	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
						03/16/1973				
S. Drivated Di	and of Pulainage	2a. Mailing Address			\longrightarrow	4. FEI Number			Appl	ed For
						94-2179407			Not Applicable	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Addition				
						5. Certifcate of Status Desired			e Requ	
27 27 City & State						6. Election Campaign Financing		\$5.	.00 м	ay Be
23		28		İ	Trust Fund Contribution Added to Fee					
Ζip	Country	Zip	Country	,		8. This corporation owes the curr	ent year Int		_	_
25		29 30			Personal Property Tax. ☑ Yes □ No				No	
	9. Name and Address of Current	Registered Agent		T		10. Name and Address of New Registered Agent				
D. 10	LEV MOUNT E		81	Name	;					
DUDLEY, MICHAEL E			82	Stree	et Address (P.O. Box Number is Not Acceptable)					
	CYPRESS CENTER DRIVE									
IAMI	PA FL 33609		83					,		
			84	City				85	Zip Co	de
							FĻ			
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	of Florida. Such change was auth-	onzea by	the cor	d corporation	ation submits this statement for the 's board of directors. I hereby accep	t the appoi	intment a	as regi	stered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florida	Statutes	3.						
SIGNATURE		ANOTS: Pa	sisternd Ace	ot evanature	a required v	then reinstating)	DATE			
12.	Signature, typed or printed name of registered agent OFFICERS ANI		13.	in agricult	Toquica W	ADDITIONS/CHANGES TO OF	FICERS AN	ND DIRE	CTOR	S IN 12
TITLE	D	☐ DELETE	1.1 TITLE		\top	•		☐ Cha		☐ Addition
NAME	HANSMEYER, HERBERT F.		1.2 NAME				•			
STREET ADDRESS	777 SAN MARIN DR.		1.3 STREE	T ADORES:	s					
CITY-ST-ZIP	SAN RAFAEL CA		1.4 CITY-S	ST-ZIP						
TITLE	SV	☐ DELETE	2.1 TITLE					☐ Cha	ınge	☐ Addition
NAME	KLOENHAMER, JANET S		2.2 NAME							ĺ
STREET ADDRESS	777 SAN MARIN DR			T ADDRES	s					
CITY-ST-ZIP	NOVATO CA 94998		2. 4 CITY-	ST-ZIP						
TITLE	DCFO	☐ DELETE	3.1 TITLE					☐ Cha	inge	☐ Addition
NAME	POST, JEFFREY H		3.2 NAME							
STREET ADDRESS	777 SAN MARIN ST		3.3 STREE	TADORES	s					
CITY-ST-ZIP	NOVATO CA		3.4. CITY-	ST-ZIP						
TITLE	VC	☐ DELETE	4,1 TITLE		ŀ			☐ Cha	inge	Addition
NAME	Warren, Richard G.		4. 2 NAME							
STREET ADDRESS	RESS 777 SAN MARIN ST 438		4.3 STREET ADDRESS		s					
CITY-ST-ZIP	NOVATO CA		4.4 CITY-5	ST-ZIP						
TITLE	DPCE	☐ DELETE	5.1 TITLE					☐ Cha	ange	☐ Addition
NAME	VALLEJOS, MICHAEL A	•	5.2 NAME							
STREET ADDRESS	777 SAN MARIN DR		5.3 STREE	TADDRES	s					
CITY-ST-ZIP	NOVATO CA 94998		5.4 CITY-5	ST-ZIP				,,		

FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90085 009 ***150.00



tered ed	
N 12 Addition	E034 (11/98)
] Addition	CR2E03
] Addition	
] Addition	
Addition	
Addition .	
	1

NOVATO CA CITY-ST-ZiP 14. 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 annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed, or

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

MARSH, HAROLD N III

777 SAN MARIN ST

TITLE

NAME

STREET ADDRESS

□ DELETE

03/31/99

(415) 899-2000

Change

DOC-829700 295265-90085-9

FAMEX, INC.

PURPOSE: To engage primarily in the specific business of acting as an insurance consultant to industry associations, franchise groups and like associations.

DIRECTORS

Herbert F. Hansmeyer P. Bruce Higgins Joseph P. Maher, Jr. Jeffrey H. Post Thomas E. Rowe Joe L. Stinnette, Jr.

ELECTED OFFICERS

Joe L. Stinnette, Jr. Joseph P. Maher, Jr.

Jeffrey H. Post

Harold N. Marsh, III

Janet S. Kloenhamer

Richard G. Warren

P. Bruce Higgins

Chairman of the Board
President
and Chief Executive Officer
Executive Vice President and
Chief Financial Officer
Senior Vice President and
Treasurer
Senior Vice President, General
Counsel and Corporate Secretary
Senior Vice President and
Controller
Vice President and Chief
Underwriting Officer

APPOINTED OFFICERS

Janet M. Holland

Assistant Secretary

Home office address: All of the above are located at 777 San Marin Drive, Novato, California 94998 unless noted