
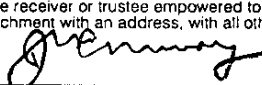


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 8:00 am
Secretary of State

04-25-2006 90105 003 ***150.00

DOCUMENT # 835294 1. Entity Name KEMPER CASUALTY INSURANCE COMPANY					
Principal Place of Business 1 KEMPER DRIVE LEGAL, 125W-0670 LONG GROVE, IL 60049-0001 US			Mailing Address 1 KEMPER DRIVE LEGAL, 125W-0670 LONG GROVE, IL 60049-0001 US		
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 36-2705935	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER PO BOX 6200 (32314-6200) 200 E. GAINES ST. TALLAHASSEE, FL 32399			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	COB <input type="checkbox"/> Delete MATHIS, DAVID B 1 KEMPER DRIVE LONG GROVE, IL 60049		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	P <input type="checkbox"/> Delete ANDREWS, DOUGLAS S 1 KEMPER DRIVE LONG GROVE, IL 60049		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	VT <input checked="" type="checkbox"/> Delete SNYDER, JOHN P 1 KEMPER DRIVE LONG GROVE, IL 600490001		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition ✓ ROBERT P. HAMES 1 KEMPER DRIVE LONG GROVE, IL 60049	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> Delete MATHIS, DAVID B 1 KEMPER DRIVE LONG GROVE, IL 600490001		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	CS <input type="checkbox"/> Delete CONWAY, JOHN K ONE KEMPER DRIVE LONG GROVE, IL 60049		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	SEE ATTACHED <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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 like empowered.					
SIGNATURE: 			JOHN K. CONWAY 4-18-06 847-320-3262		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

40061693



ATTACHMENT

40061693

#835294

Directors, Officers Report

Kemper Casualty Insurance Company

Friday, April 14, 2006

DIRECTORS

David Barrett Mathis

Chairman of the Board

First Elected: Friday, February 21,
2003

John Keating Conway

Director

First Elected: Monday, February
23, 2004

David Barrett Mathis

Director

First Elected: Monday, May 31,
1999

Benjamin David L. Schwartz

Director

First Elected: Thursday, September
29, 2005

OFFICERS

Douglas Sean Andrews

President

First Elected: Friday, January 07,
2005

Robert Paul Hames

Vice President

First Elected: Friday, October 01,
1999

Frederick Otto Kist

Vice President

First Elected: Monday, August 09,
2004

Benjamin David L. Schwartz

Vice President

First Elected: Thursday, September
29, 2005

John Keating Conway

Secretary

First Elected: Tuesday, December
31, 2002

G. Andrew Cooke

Treasurer

First Elected: Thursday, September
29, 2005

Fred T Griffith

Chief Accounting Officer

First Elected: Thursday, September
29, 2005