


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90039 014 ***150.00

DOCUMENT # 838637					
1. Entity Name FIRST FINANCIAL INSURANCE COMPANY					
Principal Place of Business 528 S FIFTH ST SUITE 210 SPRINGFIELD, IL 62701 US		Mailing Address 238 INTERNATIONAL ROAD BURLINGTON, NC 27215 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 36-2694846	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000			7. Name and Address of New Registered Agent		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
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	PD	<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BARBIERI, RICHARD C		NAME	Frank R. Dent, III	
STREET ADDRESS	238 INTERNATIONAL RD.	100 Pearl St, 5th Fl	STREET ADDRESS	238 International Rd	
CITY-ST-ZIP	BURLINGTON, NC 27215	Hartford, CT 06103	CITY-ST-ZIP	Burlington, NC 27215	
TITLE	SVPD	<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALMAGRO, JR, MANUEL		NAME	Philip Dressler	
STREET ADDRESS	238 INTERNATIONAL ROAD	100 Pearl St, 5th FL	STREET ADDRESS	238 International Road	
CITY-ST-ZIP	BURLINGTON, NC 27215	Hartford, CT 06103	CITY-ST-ZIP	Burlington, NC 27215	
TITLE	TVP	<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FABOR, KERRY WAYNE		NAME	Carol K. Hennri Kus	
STREET ADDRESS	238 INTERNTIONAL RD.		STREET ADDRESS	238 International Road	
CITY-ST-ZIP	BURLINGTON, NC 27215		CITY-ST-ZIP	Burlington, NC 27215	
TITLE	D	<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ABBOTT, RANDALL LEE		NAME	Norman M. Johnson	
STREET ADDRESS	528 S FIFTH ST, STE 210		STREET ADDRESS	480 Adams Ave	
CITY-ST-ZIP	SPRINGFIELD, IL		CITY-ST-ZIP	Glencoe, IL 60022	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FRANCIS FREEMAN, MICHAEL		NAME	maureen Lally	
STREET ADDRESS	238 INTERNATIONAL ROAD	100 Pearl St, 5th FL	STREET ADDRESS	238 International Rd	
CITY-ST-ZIP	BURLINGTON, NC 27215	Hartford, CT 06103	CITY-ST-ZIP	Burlington, NC 27215	
TITLE	D	<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LEON MARTINEZ, PHILLIP		NAME	Robert D. Linton	
STREET ADDRESS	528 S. 5TH STREET, SUITE 210		STREET ADDRESS	985 Fifth Avenue, 7B	
CITY-ST-ZIP	SPRINGFIELD, IL 62701		CITY-ST-ZIP	New York, NY 10031-0442	
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: <u>Kerry W Fabor</u>		TREASURER		Date: <u>1/23/06</u> Daytime Phone: <u>336-586-2830</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date	

ATTACHMENT

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ATTACHMENT

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City & State		City & State		01192006 Chg-P CR2E034 (11/05)	
Zip		Country		4. FEI Number 36-2694846	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARBIERI, RICHARD C 238 INTERNATIONAL RD. BURLINGTON, NC 27215	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President David A. MacLeod 100 Pearl St, 5th Floor Hartford CT 06103	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD ALMAGRO, JR, MANUEL 238 INTERNATIONAL ROAD BURLINGTON, NC 27215	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Timothy P. Martin 338 International Rd Burlington, NC 27215	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVP FAVOR, KERRY WAYNE 238 INTERNTIONAL RD. BURLINGTON, NC 27215	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Michael McMyne 100 Pearl St, 5th Floor Hartford, CT 06103	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABBOTT, RANDALL LEE 528 S FIFTH ST, STE 210 SPRINGFIELD, IL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Barbara H. Moneo 238 International Rd Burlington, NC 27215	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FRANCIS FREEMAN, MICHAEL 238 INTERNATIONAL ROAD BURLINGTON, NC 27215	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Christopher E. Strapp 100 Pearl St, 5th Floor Hartford, CT 06103	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEON MARTINEZ, PHILLIP 528 S. 5TH STREET, SUITE 210 SPRINGFIELD, IL 62701	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
				<small>Date</small> _____	