

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838637

FILED
Apr 29, 2009
Secretary of State

Entity Name: FIRST FINANCIAL INSURANCE COMPANY

Current Principal Place of Business:

528 S FIFTH ST
SUITE 210
SPRINGFIELD, IL 62701 US

New Principal Place of Business:

Current Mailing Address:

238 INTERNATIONAL ROAD
BURLINGTON, NC 27215 US

New Mailing Address:

FEI Number: 36-2694846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BARBIERI, RICHARD C
Address: 100 PEARL ST, 5TH FL
City-St-Zip: HARTFORD, CT 06103

Title: VP () Delete
Name: DENT, FRANK R
Address: 238 INTERANATIONAL RD
City-St-Zip: BURLINGTON, NC 27215

Title: VP () Delete
Name: HENNIKUS, CAROL K
Address: 238 INTERNATIONAL RD
City-St-Zip: BURLINGTON, NC 27215

Title: D () Delete
Name: JOHNSON, NORMAN M
Address: 480 ADAMS AVE
City-St-Zip: GLENCOE, IL 60022

Title: VP () Delete
Name: LALLY, MAUREEN T
Address: 238 INTERNATIONAL RD
City-St-Zip: BURLINGTON, NC 27215

Title: D () Delete
Name: MARTINEK, PHILLIP L
Address: 528 S. 57TH STREET, STE. 210
City-St-Zip: SPRINGFIELD, IL 62701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LINTON, ROBERT D
Address: 238 INTERNATIONAL ROAD
City-St-Zip: BURLINGTON, NC 27215

Title: VP (X) Change () Addition
Name: FABOR, KERRY W
Address: 238 INTERNATIONAL RD
City-St-Zip: BURLINGTON, NC 27215

Title: P (X) Change () Addition
Name: MACLEOD, DAVID A
Address: 100 PEARL STREET
City-St-Zip: HARTFORD, CT 06103

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KERRY W FABOR

VP

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date