

2005 FOR PROFIT CORPORATION ANNUAL REPORT

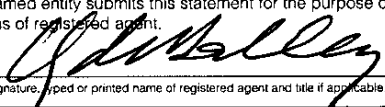
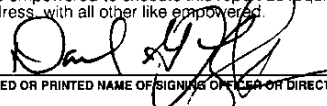
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07012005 Chg-P CR2E034 (10/03)

DOCUMENT # 840674			
1. Entity Name CENTURY AMERICAN CASUALTY COMPANY			
Principal Place of Business 1002 DEMING WAY MADISON, WI 53719 US		Mailing Address PO BOX 45650 MADISON, WI 53744-5650 US	
2. Principal Place of Business 2830 DRESDEN DRIVE Suite, Apt. #, etc.		3. Mailing Address P.O. Box 250069 Suite, Apt. #, etc.	
City & State ATLANTA GA Zip 30341 Country US		City & State ATLANTA GA Zip 30341 Country US	
4. FEI Number 75-0708507		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$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 CLYDE 'BILLY' GALLOWAY JR Street Address (P.O. Box Number is Not Acceptable) 106 EAST COLLEGE AVENUE HIGHTPOINT TOWER, SUITE 600 City TALLAHASSEE FL Zip Code 32301	
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  CLYDE W. "BILLY" GALLOWAY JR. 7-8-05 (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BRADY, CHRISTOPHER J 1002 DEMING WAY MADISON, WI 537171938 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MICHAEL H. MEADOWS 2830 DRESDEN DRIVE ATLANTA GA 30341 ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAURER, DAVID L 1002 DEMING WAY MADISON, WI 537171938 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D DANIEL G. LAZAREK 2830 DRESDEN DRIVE ATLANTA GA 30341 ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLAHERTY, TIMOTHY T MD 1002 DEMING WAY MADISON, WI 537171938 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL S. YOUNG 2830 DRESDEN DRIVE ATLANTA GA 30341 ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIX, RONALD H 1002 DEMING WAY MADISON, WI 537171938 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHONDA G. SLOAN 2830 DRESDEN DRIVE ATLANTA GA 30341 ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS, RICHARD G 1002 DEMING WAY MADISON, WI 53717 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JERRY MORRIS 2830 DRESDEN DRIVE ATLANTA GA 30341 ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MICHAEL H. MEADOWS 2830 DRESDEN DRIVE ATLANTA GA 30341 ☒ Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		DANIEL G. LAZAREK 7/1/05 234-3600 (770) Date Daytime Phone #	

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7/1/05

SECTION 11 – ADDITIONS/CHANGES TO OFFICERS AND
DIRECTORS(Continued)

JOHN J. ROUSE
2830 DRESDEN DRIVE
ATLANTA, GA 30341



Addition