2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842128

FILED Mar 28, 2006 Secretary of State

Entity Name: DISCOVER PROPERTY & CASUALTY INSURANCE COMPANY

200 CHICAGO, I	HLASALLE S	RTDEET			
CHICAGO, I		SIRLLI			
) A B.A	IL 60601	US			
Current Mailing Address:			New Maili	New Mailing Address:	
85 WASHI	NGTON STE	REET			
MAIL CODE ST PAUL, M	515A	US			
El Number: 3	36-2999370	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
ame and A	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
ORPORA	TION SERVI	CE COMPANY			
201 HAYS ALLAHAS	STREET SEE, FL 323	301 US			
he above r the State		submits this statement for th	e purpose of changing	its registered office or registered agent, or both,	
IGNATURI		· 0: 1	Δ .		
	Electro	nic Signature of Registered <i>i</i>	Agent	Date	
ection Cam _l	paign Financir	ng Trust Fund Contribution ().			
FFICERS	AND DIREC	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
ddress:	D (CHODORA, GI 385 WASHING ST. PAUL, MN	STON ST.	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CHODORA, GREGORY T 385 WASHINGTON STREET ST. PAUL, MN 55102	
ame: ddress:	PD (ESTES, GEOF 385 WASHING ST. PAUL, MN	STON ST	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition WRIGHT, ARTHUR W ONE TOWER SQUARE HARTFORD, CT 06183	
ame: ddress:	VT (RUSSELL, DC ONE TOWER HARTFORD, C	SQUARE	Title: Name: Address: City-St-Zip:	() Change () Addition	
tle: ame: ddress: ity-St-Zip:	D (ROCHE, JOHN 200 N LASALL CHICAGO, IL	E STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition MACLEAN, BRIAN W ONE TOWER SQUARE HARTFORD, CT 06183	
tle: ame: ddress: ity-St-Zip:	VD (TREACY, JOH 385 WASHING ST. PAUL, MN	STON STREET	Title: Name: Address: City-St-Zip:	VT (X) Change () Addition RUSSELL, DOUGLAS K ONE TOWER SQUARE HARTFORD, CT 06183	
tle: ame: ddress: ity-St-Zip:	S (BACKBERG, E 385 WASHING ST. PAUL, MN	STON ST	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE A. BACKBERG S 03/28/2006