

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 842128

FILED
Apr 10, 2003
Secretary of State

Entity Name: DISCOVER PROPERTY & CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

500 MADISON ST
2600
CHICAGO, IL 60661 US

New Principal Place of Business:

Current Mailing Address:

385 WASHINGTON STREET
ST PAUL, MN 55102 US

New Mailing Address:

385 WASHINGTON STREET
MAIL CODE 515A
ST PAUL, MN 55102 US

FEI Number: 36-2999370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: CHODORA, GREGORY T
Address: 385 WASHINGTON ST.
City-St-Zip: ST. PAUL, MN 55102

Title: PD () Delete
Name: ESTES, GEORGE L
Address: 385 WASHINGTON ST
City-St-Zip: ST. PAUL, MN 55102

Title: DV () Delete
Name: CONROY, MICHAEL J
Address: 385 WASHINGTON STREET
City-St-Zip: ST. PAUL, MN 55102

Title: V () Delete
Name: BRADLEY, THOMAS A
Address: 385 WASHINGTON STREET
City-St-Zip: ST. PAUL, MN 55102

Title: D () Delete
Name: DUFFY, JAMES F
Address: 385 WASHINGTON STREET
City-St-Zip: ST. PAUL, MN 55102

Title: SV () Delete
Name: BACKBERG, BRUCE A
Address: 385 WASHINGTON ST
City-St-Zip: ST. PAUL, MN 55102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VT (X) Change () Addition
Name: MCDONOUGH, PAUL H
Address: 385 WASHINGTON STREET
City-St-Zip: ST. PAUL, MN 55102

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

Title: D (X) Change () Addition
Name: YESSMAN, TIMOTHY M
Address: 385 WASHINGTON STREET
City-St-Zip: ST. PAUL, MN 55102

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

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 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

SV

04/10/2003

Electronic Signature of Signing Officer or Director

_____ Date