**FILED** 

May 05, 2003 8:00 am Secretary of State

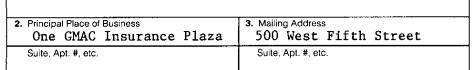
Principal Place of Business 11960 WESTLINE INDUSTRIAL

ST. LOUIS MO 63146

Mailing Address

11960 WESTLINE INDUSTRIAL

ST. LOUIS MO 63146





TA CHECK HERE IF MAKING CHANGES

Applied For City & State City & State 4. FEI Number 58-1140651 Winston-Salem, NC 27152 Hazelwood, MO 63045 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 27152 63045 USA USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent

Insurance commissioner & Treasurer DEPARTMENT OF INSURANCE LARSON BUILDING

TALLAHASSE FL 32399-7300

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. P CEO D ☐ Change X Addition Delete TITLE CD TITLE Gary Y Kusumi ADAMS, STEVE NAME NAME 11960 WESTLINE INDUSTRIAL DR. STREET ADDRESS STREET ADDRESS One GMAC Insurance Plaza CITY-ST-ZIP SAINT LOUIS MO 63146 CITY-ST-ZIP Hazelwood, MO 63045 **VDT** ☐ Delete TITLE EVP & CFO & D Change X Addition WILLIAMS, JOSEPH D NAME Bernard J. Buselmeier STREET ADDRESS STREET ADDRESS 11960 WESTLINE INDUSTRIAL DR One GMAC Insurance Plaza CITY-ST-ZIP CITY-ST-ZIP SAINT LOUIS MO 63146 Hazelwood, MO 63045 TITLE ☐ Delete TITLE VP CA. D. ☐ Change NAME BOYSEN, WAYNE A NAME Daniel C. Pickens STREET ADDRESS STREET ADDRESS 11960 WESTLINE INDUSTRIAL 500 West Fifth Street CITY-ST-ZIP CITY-ST-ZIP SAINT LOUIS MO 63146 Winston-Salem, NC 27152 ☐ Delete TITLE VP S D ☐ Change X Addition DP TITLE NAME Sheena E. Poe NAME Hume , ted STREET ADDRESS STREET ADDRESS 11960 WESTLINE INDUSTRIAL 500 West Fifth Street CITY-ST-ZIP CITY-ST-7IP SAINT LOUIS MO 63146 Winston-Salem, NC 27152 VP T CAO Change X Addition ☐ Delete TITLE TITLE NAME MILLER, SCOTT F NAME Donald J. Bolar STREET ADDRESS STREET ADDRESS 11960 WESTLINE DR 500 West Fifth Street CITY-ST-ZIP CITY-ST-ZIP ST LOUIS MO 63146 Winston-Salem, NC 27152 DVP CClaims Policy Sales & Service officer ۷D ☐ Delete TITLE TITLE NAME DORAN, STEVE NAME John Urankar STREET ADDRESS 11960 WESTLINE INDUSTRIAL STREET ADDRESS One GMAC Insurance Plaza CITY-ST-ZIP CITY-ST-ZIP SAINT LOUIS MO 63146 Hazelwood, MO 63045.

12. I hereby certify that the information supplied with this filling 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.



Sheena E. Poe

4/24/03

(336) 770-2675