## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 844748**

FILED Jan 14, 2009 Secretary of State

| Entity Name: INFINITY AUTO INSURANCE COMPANY   |   |                            |   |  |  |  |
|--|---|----------------------------|---|--|--|--|
| Current Principal Place of Business:   |   |                            | New Principal Place of Business:            |  |  |  |
| ONE EAST   | /IDENT TOWE<br>FOURTH ST.<br>II, OH 45202               | R<br>US                    |   |  |  |  |
| Current Ma   | ailing Address  | <b>::</b>                  | New Mailir                                  | ng Address:  |  |  |
| 3700 COLONNADE PARKWAY<br>BIRMINGHAM, AL 35243 US  |   |                            |   |  |  |  |
| FEI Number:  | 34-0927698  | FEI Number Applied For ( ) | El Number Not Appli                         | cable ( ) Certificate of Status Desired ( )  |  |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent:  |   |                            |   |  |  |  |
| CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 US  |   |                            |   |  |  |  |
| 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:  |   |                            | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:   |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | D () I<br>GOBER, JAMER<br>3700 COLONNA<br>BIRMINGHAM, A | DE PARKWAY                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition  |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | STONE, TOMMY  | RPENTER FREEWAY            | Title:<br>Name:<br>Address:<br>City-St-Zip: | CEOP (X) Change ( ) Addition<br>GODWIN, GLEN N<br>3700 COLONNADE PARKWAY<br>BIRMINGHAM, AL 35243     |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | D () SMITH, ROGER<br>3700 COLONNA<br>BIRMINGHAM, A      |                            | Title:<br>Name:<br>Address:<br>City-St-Zip: | CFOD (X) Change ( ) Addition<br>SMITH, ROGER<br>3700 COLONNADE PARKWAY<br>BIRMINGHAM, AL 35243       |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | TD () PRESTRIDGE, F<br>3700 COLONNA<br>BIRMINGHAM, A    | DE PARKWAY                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | VTD (X) Change ( ) Addition<br>PRESTRIDGE, ROGER H<br>3700 COLONNADE PARKWAY<br>BIRMINGHAM, AL 35243 |  |  |
| Title:   | SD ()   | Delete                     | Title:                                      | VSD (X) Change ( ) Addition  |  |  |

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.

Name:

Address:

City-St-Zip:

SIMON, SAMUEL J

3700 COLONNADE PARKWAY

BIRMINGHAM, AL 35243

SIGNATURE: ROGER H. PRESTRIDGE VTD 01/14/2009

SIMON, SAMUEL J

3700 COLONNADE PARKWAY

BIRMINGHAM, AL 35243

Name:

Address:

City-St-Zip: