

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 10, 2004 08:00 AM
Secretary of State

DOCUMENT # 846169

1. Entity Name

OMAHA PROPERTY AND CASUALTY INSURANCE COMPANY



Principal Place of Business

3102 FARNAM STREET
OMAHA NE 68131

Mailing Address

3102 FARNAM STREET
OMAHA NE 68131

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-2656602

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE FL 32399-0000

Name

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

City

FL

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 file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VT
BOETEL, MARK R.
511 S. 158 AVE. CIRCLE
OMAHA NE ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
000000044834 ☐ Change ☐ Addition
02/11/04-80037-021 150.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
HUERTER, M. JANE
1402 S 78TH ST
OMAHA NE ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
STURGEON, JOHN A
1515 SOUTH 182 CIRCLE
OMAHA NE 68130 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
PRICE, DEBROAH S.
7524 N 78TH ST
OMAHA NE 68122 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
DOURNEY, MARTIN W.
15942 PATRICK AVE
OMAHA NE ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WEEKLY, JOHN W
26747 BLONDO COURT
WATERLOO NE 68069 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ 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: Mark R. Boetel Mark R. Boetel, Treasurer

02/04/2004 (402) 351-5468

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #