


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 849944 (4) 1. Corporation Name EMPLOYERS REINSURANCE CORPORATION			
Principal Place of Business 5200 METCALF P.O. BOX 2991 OVERLAND PARK KANSAS 66201		Mailing Address 5200 METCALF P.O. BOX 2991 OVERLAND PARK KANSAS 66201	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent INSURANCE COMMISSIONER STATE OF FLORIDA CAPITAL BLDG TALLAHASSEE FL FL 32301		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LEWIS, DORSEY 8200 METCALF OVERLAND PK KS [] DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	[] Change [] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD LEVIN, JOSEPH W. 8200 METCALF OVERLAND PK KS [] DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	[] Change [] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MONROE, ROBERT E 5200 METCALF OVERLAND PK FL [] DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	[] Change [] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVDC CONNELLY, JOHN M. 5200 METCALF OVERLAND PK KS [] DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	[] Change [] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD DORE, JAMES F 5200 METCALF OVERLAND PK KS [] DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	[] Change [] Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD AHLMANN, KAJ 5200 METCALF OVERLAND PK KS [] DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	[] Change [] Addition



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/06/1981	
4. FEI Number 48-0921045	Applied For [] Not Applicable
5. Certificate of Status Desired []	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution []	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [] Yes [] No	

SIGNATURE:

Robert E. Monroe

Robert E.
Monroe

1-7-98

912-676-5351

CR2E034 (10/97)