


2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 850230	
1. Entity Name FIREMAN'S FUND INSURANCE COMPANY OF WISCONSIN	

FILED
06 OCT 20 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 125 N EXECUTIVE DRIVE SUITE 209 BROOKFIELD, WI 53005 US	Mailing Address 777 SAN MARIN DR. C/O CORP SECRETARY'S OFFICE NOVATO, CA 94998 US
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10102006 REIN-P CR2E098 (11/05)

2. Principal Place of Business 303 West Madison St. Suite, Apt. #, etc. Suite # 500 City & State Chicago, IL Zip 60606 Country U.S.A.	3. Mailing Address 11680 Great Oaks Way Suite, Apt. #, etc. Suite A 500 City & State Alpharetta, GA Zip 30022 Country U.S.A.
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4. FEI Number 39-1338397	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$750.00
After January 1, 2007, Fee will be \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WONG, JEANNETTE Y 777 SAN MARIN DRIVE NOVATO, CA 94998 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition See Attached.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS KLOENHAMER, JANET S 777 SAN MARIN DR NOVATO, CA 94998 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200081004042 10/19/06--01013--003 **750.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP KAVITSKY, CHARLES M 777 SAN MARIN DR NOVATO, CA 94998 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PATERSON, JILL E 777 SAN MARIN DRIVE NOVATO, CA 94998 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT WRIGHT, LINDA E 777 SAN MARIN DR. NOVATO, CA 94998 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition REINSTATEMENT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BENEDUCCI, JOSEPH J 777 SAN MARIN DRIVE NOVATO, CA 94998 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Denise A. King, Asst. Secretary 10/10/2006 (678) 746-9477
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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FLORIDA - 2006 For Profit Corporation Reinstatement Attachment

Item# 10: Additions to Officers and Directors

Officers:

Name (Last, First Middle)

Title and Address

Gieryn, Richard Thomas, Jr.

Director, Senior Vice President, General Counsel &
Secretary
11680 Great Oaks Way, Suite 500
Alpharetta, GA 30022

King, Denise A.

Assistant Secretary
11680 Great Oaks Way, Suite 500
Alpharetta, GA 30022

Kuhn, John Andrew

Director and Senior Vice President
300 Connell Drive, Suite 2000
Berkeley Heights, NJ 07922

Price, Cheryl Lynn

Director, Senior Vice President & Treasurer
11680 Great Oaks Way, Suite 500
Alpharetta, GA 30022

Reding, Dennis Bernard

Executive Vice President
11680 Great Oaks Way, Suite 500
Alpharetta, GA 30022

Turner, F. Marshall

Director, Chairman of the Board, President &
Chief Executive Officer
11680 Great Oaks Way, Suite 500
Alpharetta, GA 30022