

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90006 049 ***150.00

DOCUMENT # 852519

1. Entity Name

GLOBE AMERICAN CASUALTY COMPANY

00039702



DO NOT WRITE IN THIS SPACE

Principal Place of Business N MERIDIAN ST 600 IN 46032	Mailing Address 1811 N MERIDIAN ST STE 600 CARMEL IN 46032 US
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2. Principal Place of Business 350 E. 96TH ST. Suite, Apt. #, etc.	3. Mailing Address P.O. BOX 6070 Suite, Apt. #, etc.
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City & State INDIANAPOLIS, IN	City & State INDIANAPOLIS, IN	4. FEI Number 31-4386540	Applied For Not Applicable
Zip 46240	Country US	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent INSURANCE COMMISSIONER OF FLORIDA CAPITOL BLDG. TALLAHASSEE FL 32301	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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HASKOWITZ, HOWARD 61 BROADWAY NEW YORK NY <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BUDDE, MARK R. 350 E. 96TH ST. INDIANAPOLIS, IN 46240 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV ELLIPT S OROL 61 BROADWAY 33RD FLOOR NEW YORK NY <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV TAYLOR, JANE F. 62 MAPLE AVE. KEENE, NH 03431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALLARD, EUGENE 61 BROADWAY NEW YORK NY 10006 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV TRACEY, JOSEPH P. 62 MAPLE AVE. KEENE, NH 03431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JEAN, ROGER 62 MAPLE AVE KEENE NH 03431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEAN, ROGER 62 MAPLE AVE. KEENE, NH 03431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YERRILL, VICTOR 61 BROADWAY NEW YORK NY 10006 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FIEBRINK, MARK E. 62 MAPLE AVE. KEENE, NH 03431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ZARANDONA, JOSEPH 61 BROADWAY NEW YORK NY 10006 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSON, FORREST H. 62 MAPLE AVE. KEENE, NH 03431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark R. Budde BUDDER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 4/12/2000 Daytime Phone #: (317) 816-3400

CR2E034 (9/99)

#852519

D0039702

ADDITIONS/CHANGES TO OFFICERS & DIRECTORS

V ADDITION
FONTANES, A. ALEX
175 BERKELEY ST.
BOSTON, MA 02117

V ADDITION
KIRK, JEFFREY A.
350 E. 96TH ST.
INDIANAPOLIS, IN 46240

V ~~ADDITION~~
HEALY, JUSTIN
62 MAPLE AVE.
KEENE, NH 03431

D ADDITION
LANGWELL, DENNIS J.
175 BERKELEY ST.
BOSTON, MA 02117

D ADDITION
WILLIAMS, ELLIOT J.
175 BERKELEY ST.
BOSTON, MA 02117

D ADDITION
CONDRIN, J PAUL III
175 BERKELEY ST.
BOSTON, MA 02117

D ADDITION
MANSFIELD, CHRISTOPHER C.
175 BERKELEY ST.
BOSTON, MA 02117

D ADDITION
SWEENEY, TIMOTNY M.
175 BERKELEY ST.
BOSTON, MA 02117