

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853453

FILED
Apr 20, 2010
Secretary of State

Entity Name: VANLINER INSURANCE COMPANY

Current Principal Place of Business:

ONE PREMIER DRIVE
ST LOUIS, MO 63026 US

New Principal Place of Business:

Current Mailing Address:

ONE PREMIER DRIVE
ST LOUIS, MO 63026 US

New Mailing Address:

FEI Number: 86-0114294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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:

Title: P
Name: PRESTON, GALE D
Address: ONE PREMIER DR.
City-St-Zip: FENTON, MO 63026

Title: T
Name: POWERS, JAMES G
Address: ONE PREMIER DRIVE
City-St-Zip: ST. LOUIS, MO 63026

Title: AT
Name: AMANN, PETER J
Address: ONE PREMIER DR
City-St-Zip: ST LOUIS, MO 63026

Title: SECR
Name: WEIR, DAVID T
Address: ONE PREMIER DRIVE
City-St-Zip: ST LOUIS, MO 63026

Title: CEO
Name: MCCLURE, RICHARD H
Address: ONE PREMIER DRIVE
City-St-Zip: ST LOUIS, MO 63026

I hereby 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 all other like empowered.

SIGNATURE: PETER J AMANN

AT

04/20/2010

Electronic Signature of Signing Officer or Director

Date