

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853453

FILED
Jan 04, 2011
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:

3250 INTERSTATE DRIVE
RICHFIELD, OH 44286 US

FEI Number: 86-0114294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331 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

OFFICERS AND DIRECTORS:

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

Title: TD
Name: MCGRAW, JULIE A
Address: 3250 INTERSTATE DRIVE
City-St-Zip: RICHFIELD, OH 44286

Title: ATD
Name: MONDA, GARY N
Address: 3250 INTERSTATE DRIVE
City-St-Zip: RICHFIELD, OH 44286

Title: SD
Name: GONZALES, ARTHUR J
Address: 3250 INTERSTATE DRIVE
City-St-Zip: RICHFIELD, OH 44286

Title: CEOD
Name: MERCURIO, ANTHONY J
Address: 3250 INTERSTATE DRIVE
City-St-Zip: RICHFIELD, OH 44286

Title: D
Name: MICHELSON, DAVID W
Address: 3250 INTERSTATE DRIVE
City-St-Zip: RICHFIELD, OH 44286

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: ARTHUR J. GONZALES

S

01/04/2011

Electronic Signature of Signing Officer or Director

Date