

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **857204** (2)
1. Corporation Name
PROVIDIAN PROPERTY AND CASUALTY INSURANCE COMPAN
Y

Principal Place of Business 11975 WESTLINE INDUSTRIAL DR. P O BOX 34420 ST. LOUIS MO 63146	Mailing Address 11975 WESTLINE INDUSTRIAL DR. P O BOX 34420 ST. LOUIS MO 63146
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/26/1983	
4. FEI Number 61-6027355	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	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	
9. Name and Address of Current Registered Agent STATE INSURANCE COMMISSIONER CAPITOL BLDG. TALLAHASSEE 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 FL	

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 _____ (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	CEO SHAILESH J. MEHIA 201 MISSION ST SAN FRANCISCO CA ☒ 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	PD MILLER, DAVID J 20 MOORES ROAD FRAZER PA ☒ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	P/D David G. Retoski 1111 N. Charles St. Baltimore, MD 21202 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO BRADY, DENNIS E. 20 MOORES ROAD FRAZER PA ☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	T Joseph C. Noone 20 Moores Rd. Frazer, PA 19355 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CONGDON, JULIE 20 MOORES ROAD FRAZER PA ☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	VP/D Edward A. Biemer 20 Moores Rd. Frazer, PA 19355 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BERMAN, JAY H 20 MOORES ROAD FRAZER PA ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	V/S/D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SARCIA, DOUGLAS 424 CHRISLENA LANE WEST CHESTER PA ☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *M. J. Mehia* *M. J. Mehia* *4/3/98* *610-648-4813*

CR2E034 (10/97)

PROVIDIAN PROPERTY AND CASUALTY INSURANCE COMPANY
ADDITIONAL OFFICERS AND DIRECTORS

Senior Vice President

**Thomas P. Bowie
20 Moores Road
Frazer, PA 19355**

Vice President

**Brenda K. Clancy
4333 Edgewood Road, N.E.
Cedar Rapids, IA 52499**

Vice President & Associate General Counsel

**Susan E. Martin
20 Moores Road
Frazer, PA 19355**

Vice President

**Thomas B. Nesspor
20 Moores Road
Frazer, PA 19355**

Vice President & Qualified Actuary

**Brian C. Fischer
20 Moores Road
Frazer, PA 19355**

Assistant Secretary

**Mary Ann Malinyak
20 Moores Road
Frazer, PA 19355**

Director

**Craig D. Vermie
4333 Edgewood Road, N.E.
Cedar Rapids, IA 52499**