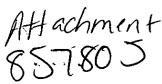
| "FOOD OIGH OLIM DO | ISINESS REP | 'URI (UBR) | 19/19/ |
|--|--|--|---|
| DOCUMENT # 85 1. Entity Name Cal Fed Insurance | 7805 | • • • • • | APPROVED' |
| Principal Place of Business | Mailing Address | · • | UU.MAY -1, PH 12: 57 |
| 2710 Winona Burbank, CA 91504 | 2710 Wino | na | |
| 2. Principal Place of Business | 3. Mailing Address | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | / | DO NOT WRITE IN THIS SPACE |
| City & State | City & State | | 4. FEI Number Applied For |
| Zip Country | Zip | Country | 5 Certificate of Status Desired \$8.75 Additional |
| 6. Name and Address of Cui | rent Registered Agent | <u></u> | 7. Name and Address of New Registered Agent |
| CT Corporation System | | Name | , |
| 1200 South Pine Islan | | Street Addr | ess (P.O. Box Number is Not Acceptable) |
| Planation, FL 33324 | | | |
| • | • | City | F ■ Zip Code |
| 8. The above named entity submits this statement | ent for the purpose of changing | Mailing Address Attn: Licensing Dept. 2710 Winona Burbank, CA 91504 3. Mailing Address Suite, Apt. #, etc. , DO NOT WRITE IN THIS SPACE City & State | |
| SIGNATURE Signature, typed or printed name of registered 9. This corporation is eligible to satisfy its Intan Tax filing requirement and elects to do so. (See criteria on back). | agent and title if applicable. (if gible FILE NO After MAY 1; Make Check Par | g its registered office or reconstruction of the control of the co | gistered agent, or both, in the State of Florida. DATE 10. Election Campaign Financing Trust Fund Contribution. State \$5.00 May Be Added to Fees |
| SIGNATURE Signature, typed or printed name of registered 9. This corporation is eligible to satisfy its Intan Tax filing requirement and elects to do so. (See criteria on back). | agent and title if applicable. (() gible FILE NO After MAY 1; | g its registered office or reconstruction of the property of t | gistered agent, or both, in the State of Florida. DATE |
| SIGNATURE Signature, typed or printed name of registered 9. This corporation is eligible to satisfy its Intan Tax filing requirement and elects to do so. (See criteria on back) 11. OFFICERS | agent and trile if applicable. (() gible FILE NO After MAY 1; Make Check Pat AND DIRECTORS | g its registered office or reconstruction of the property of t | gistered agent, or both, in the State of Florida. 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees State |
| SIGNATURE Signature, typed or printed name of registered 9. This corporation is eligible to satisfy its Intan Tax filing requirement and elects to do so. (See criteria on back). 11. OFFICERS. ITILE BAME STREET ADDRESS CITY-ST-ZIP | agent and title if applicable. (figure of the policies) gible FILE NO After MAY 1. Make Check Parance of the policies of the | g its registered office or reconstruction of the company of the co | gistered agent, or both, in the State of Florida. 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees |
| SIGNATURE Signature, typed or printed name of registered 9. This corporation is eligible to satisfy its Intan Tax filing requirement and elects to do so. (See criteria on back). 11. OFFICERS. INTLE INTERET ADDRESS INTY-ST-ZIP INTLE VAME STREET ADDRESS STREET ADDRESS | agent and title if applicable. (figure of the policies) gible FILE NO After MAY 1. Make Check Parance of the policies of the | g its registered office or registered Agent signature recommend of the state of the | gistered agent, or both, in the State of Florida. State |
| SIGNATURE Signature, typed or printed name of registered 9. This corporation is eligible to satisfy its Intain Tax filing requirement and elects to do so. (See criteria on back) 11. OFFICERS INTUE INT | agent and trile if applicable. (i) gible FILE NO After MAY 1, Make Check Par AND DIRECTORS Delete Delete Delete 0.00 *******70.00 | g its registered office or registered Agent signature of the control of the contr | gistered agent, or both, in the State of Florida. 10. Election Campaign Financing Trust Fund Contribution. |
| SIGNATURE Signature, typed or printed name of registered 9. This corporation is eligible to satisfy its Intan Tax filing requirement and elects to do so. (See criteria on back). 11. OFFICERS. INTLE HAME STREET ADDRESS CITY-ST-ZIP ITTLE HAME STREET ADDRESS | agent and title if applicable. (I) gible FILE NO After MAY 1. Make Check Pa AND DIRECTORS Delete Delete Delete Delete | g its registered office or registered Agent signature of the control of the contr | gistered agent, or both, in the State of Florida. 10. Election Campaign Financing Trust Fund Contribution. Added to Fees State |

SIGNATURE: 4







Cal Fed Insurance Agency, Inc. Attachment "A" to 2000 Uniform Business Report

12. Additional Officers and Directors

Jennifer A Reesha

Senior Vice President

Primary Address:

5280 Corporate Drive Frederick, Maryland 21701

David W. Bennett

Vice President and Risk Management Officer

Primary Address:

135 Main Street

San Francisco, California 94105

James P. Murray

Vice President and Chief Tax Officer

Primary Address:

135 Main Street

San Francisco, California 94105

Cheryl High

Vice President

Primary Address:

5280 Corporate Drive

Frederick, Maryland 21701

Kathleen T. Egan

Assistant Secretary

Primary Address:

5280 Corporate Drive

Frederick, Maryland 21701

Brenda S. Hormes

Assistant Secretary

Primary Address:

5280 Corporate Drive

Frederick, Maryland 21701

Blakeney B. Kurad

Assistant Secretary

Primary Address:

135 Main Street

San Francisco, California 94105

Jeanne E. Markle

Assistant Secretary

Primary Address:

5280 Corporate Drive Frederick, Maryland 21701

riedelick, Malyland 21701