

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 857982

FILED
May 01, 2007
Secretary of State

Entity Name: EVERGREEN NATIONAL INDEMNITY COMPANY

Current Principal Place of Business:

2800 CORPORATE EXCHANGE DRIVE
SUITE 130
COLUMBUS, OH 43231

New Principal Place of Business:

Current Mailing Address:

2800 CORPORATE EXCHANGE DRIVE
SUITE 130
COLUMBUS, OH 43231

New Mailing Address:

FEI Number: 36-2467238

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: ELLIS, ROSWELL P
Address: 2800 CORPORATE EXCHANGE DR, STE 130
City-St-Zip: COLUMBUS, OH 43231

Title: D () Delete
Name: FEIGHAN, EDWARD F
Address: 465 CLEVELAND AVE
City-St-Zip: WESTERVILLE, OH 43082

Title: DVP () Delete
Name: STOUT, CRAIG L
Address: 10055 SWEET VALLEY DRIVE
City-St-Zip: VALLEY VIEW, OH 44125

Title: DPST () Delete
Name: HAMM, CHARLES D JR
Address: 2800 CORPORATE EXCHANGE DRIVE, SUITE 130
City-St-Zip: COLUMBUS, OH 43231

Title: D () Delete
Name: CLARK, DANIEL J
Address: 6140 PARKLAND BLVD.
City-St-Zip: MAYFIELD HEIGHTS, OH 44124

Title: VP (X) Delete
Name: ELLIS, TIMOTHY C
Address: 2800 CORPORATE EXCHANGE DRIVE, SUITE 130
City-St-Zip: COLUMBUS, OH 43231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: STOUT, CRAIG L
Address: 10055 SWEET VALLEY DRIVE
City-St-Zip: VALLEY VIEW, OH 44125

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHARLES D. HAMM

DPST

05/01/2007

Electronic Signature of Signing Officer or Director

Date