2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 25, 2006 8:00 am Secretary of State 04-25-2006 90105 005 ***150.00 DOCUMENT # F0000001893 1. Entity Name SPECIALTY SURPLUS INSURANCE COMPANY Principal Place of Business Mailing Address 40061691 1 KEMPER DRIVE 1 KEMPER DRIVE LONG GROVE, IL 60049 LONG GROVE, IL 60049 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 04142006 Chg-P CR2E034 (11/05) Applied For City & State City & State 4. FEI Number 22-1688641 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) THE CAPITAL TALLAHASSEE, FL. 32304 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11, COB ☐ Delete TITLE ☐ Change ☐ Addition TITLE MATHIS, DAVID B ONE KEMPER DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP L'ONG GROVE, IL 60049 CITY-ST-ZIP TITLE Ρ. ☐ Delete Change ☐ Addition DOUGLAS, ANDREWS S NAME NAME STREET ADDRESS 1,KEMPER DR STREET ADDRESS CITY-ST-ZIP LONG GROVE, IL 60049 CITY - ST - ZIP TITLE Delete TITLE Change ☐ Addition NAME HAMES, ROBERT NAME STREET ADDRESS 1 KEMPER DRIVE STREET ADDRESS CITY-ST-ZIP LONG GROVE, IL 60049 CITY-ST-7IP TITLE **VPT X** Delete TITLE Change ☐ Addition NAME ENYDER, JOHN F NAME FREDERICK OTTO KIST STREET ADDRESS 1 KEMPER DRIVE STREET ADDRESS I KEMPER DRIVE LONG GROVE, IL 60049 CITY-ST-ZIP CITY-ST-ZIE LONG GROVE IL THILE ☐ Delete TITLE □ Change ☐ Addition CONWAY, JOHN K NAME NAME 1 KEMPER DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP LONG GROVE, IL 60049 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SEE ATTACHED NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if address, with all other like empowered.

SIGNATURE:

JOHN K. CONWAY IATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4-18-06

47-320-3262

FILED

ATTACHMENT

Directors, Officers Report

Specialty Surplus Insurance Company #F000000/893

Friday, April 14, 2006

DIRECTORS

David Barrett Mathis

Chairman of the Board

First Elected: Tuesday, December

31, 2002

John Keating Conway

Director

First Elected: Monday, February

23, 2004

David Barrett Mathis

Director

First Elected: Monday, January 03,

2000

Benjamin David L. Schwartz

Director

First Elected: Thursday, September

29, 2005

OFFICERS

Douglas Sean Andrews

President

First Elected: Friday, January 07,

2005

Robert Paul Hames

Vice President

First Elected: Monday, January 03,

2000

Frederick Otto Kist

Vice President

First Elected: Monday, August 09,

2004

Benjamin David L. Schwartz

Vice President

First Elected: Thursday, September

29, 2005

John Keating Conway

Secretary

First Elected: Tuesday, December

31, 2002

G. Andrew Cooke

Treasurer

First Elected: Thursday, September

29, 2005

Fred T Griffith

Chief Accounting Officer

First Elected: Thursday, September

29, 2005