

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003138

FILED
Feb 19, 2004
Secretary of State

Entity Name: PACO ASSURANCE COMPANY, INC.

Current Principal Place of Business:

110 WESTWOOD PLACE, STE 100
BRENTWOOD, TN 37027

New Principal Place of Business:

Current Mailing Address:

110 WESTWOOD PLACE, STE 100
BRENTWOOD, TN 37027

New Mailing Address:

FEI Number: 36-3998471

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: BRANT, JERRY D
Address: 110 WESTWOOD PL, STE 100
City-St-Zip: BRENTWOOD, TN

Title: TD () Delete
Name: WEBB, T. DOUGLAS
Address: 110 WESTWOOD PL, STE 100
City-St-Zip: BRENTWOOD, TN

Title: D () Delete
Name: WILCZEK, ADAM P
Address: 110 WESTWOOD PL, STE 100
City-St-Zip: BRENTWOOD, TN

Title: D () Delete
Name: WHITAKER, G SCOTT
Address: 110 WESTWOOD PL, STE 100
City-St-Zip: BRENTWOOD, TN

Title: S () Delete
Name: CROWHURST, JEFFREY
Address: 1703 POLARIS CIRCLE
City-St-Zip: OTTAWA, IL

Title: D () Delete
Name: MIKLOS, ROBERT C
Address: 6634 W. ARCHER AVE
City-St-Zip: CHICAGO, IL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: JANET C. FOX

AS

02/19/2004

Electronic Signature of Signing Officer or Director

Date

JANET C. FOX, ASST. SECRETARY
110 WESTWOOD PLACE, SUITE 100
BRENTWOOD, TN 37027

DONALD HUGAR, DPM, DIRECTOR
HUGAR FOOT & ANKLE SPECIALIST
1614 N. HARLEM AVE
ELMWOOD PARK, IL 60707