

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003998

Entity Name: C.P.A. INSURANCE COMPANY

FILED
Feb 28, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 250010
WEST BLOOMFIELD, MI 483250010

New Principal Place of Business:

4312 ORCHARD LAKE ROAD
WEST BLOOMFIELD, MI 48325

Current Mailing Address:

P.O. BOX 250010
WEST BLOOMFIELD, MI 483250010

New Mailing Address:

FEI Number: 38-0391970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CPT () Delete
Name: ROSS, WILLIAM JAMES III
Address: 4312 ORCHARD LAKE ROAD, SUITE 200
City-St-Zip: WEST BLOOMFIELD, MI 48323

Title: D () Delete
Name: BREER, CORINNE HELEN
Address: 3054 KINGS GATE WAY
City-St-Zip: BLOOMFIELD HILLS, MI 48302

Title: S () Delete
Name: ROSS, MICHELLE A
Address: 4312 ORCHARD LAKE RD STE 200
City-St-Zip: WEST BLOOMFIELD, MI 48323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPT (X) Change () Addition
Name: ROSS, WILLIAM JAMES III
Address: 215 RUDDER ROAD
City-St-Zip: VERO BEACH, FL 32963

Title: DIR (X) Change () Addition
Name: BREER, CORINNE H
Address: 3054 KINGS GATE WAY
City-St-Zip: BLOOMFIELD HILLS, MI 48302

Title: S (X) Change () Addition
Name: ROSS, MICHELLE A
Address: 215 RUDDER ROAD
City-St-Zip: VERO BEACH, FL 32963

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT I. DAILEY

EVP

02/28/2007

Electronic Signature of Signing Officer or Director

Date