

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F01000002734

1. Entity Name
COMMONWEALTH INSURANCE COMPANY OF AMERICA



Principal Place of Business
601 UNION ST., SUITE 3201
SEATTLE WA 98101

Mailing Address
PO BOX 34069
SEATTLE WA 98124

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90461 040 ***155.00

11002410



2. Principal Place of Business

3. Mailing Address

1700 Seventh Avenue

Suite, Apt. #, etc.

Suite 1850

City & State
Seattle, WA

Suite, Apt. #, etc.

City & State

Zip
98101-1397

Country
USA

Zip

Country

4. FEI Number 91-1673817

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

APR 10 2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution, ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PC
SCHWAB, RONALD G
595 BURRARD STREET, SUITE 1500
VANCOUVER BC CANADA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
HURFORD, CRAIG A
595 BURRARD STREET, SUITE 1500
VANCOUVER BC CANADA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
PARRY, DONALD M
595 BURRARD STREET, SUITE 1500
VANCOUVER BC CANADA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
PHILLIPS, NOEL E
595 BURRARD STREET, SUITE 1500
VANCOUVER BC CANADA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BENNETTS, WINSLOW W
505 BURRARD STREET, SUITE 1880
VANCOUVER BC CANADA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VC
HUNTER, EDWARD
601 UNION STREET, SUITE 3201
SEATTLE WA 98101 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald M. Parry

Date

Daytime Phone #

APR 10 2003

(604) 683-5511

CR2E034 (10/02)