2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

ANNUAL REPORT							Secretary of State					
DOCUMENT # F0400001881 1. Entity Name AMERICAN GENERAL INDEMNITY COMPANY							04-28-2008	_				
Principal Place	e of Business	Mailing Address		L								
Principal Place of Business 1000 E. WOODFIELD ROAD SCHAUMBURG, IL 60173-4793		3600 ROUTE 66 NEPTUNE, NJ 07754-1580		•	4 INSTITUT (II)		811 12 111 PT121 111		1/11 in 189)			
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03312008	Chg-P	CR2E0	34 (12/06)				
City & State	е	City & State				4. FEI Numbe 93-0928			<u> </u>	oplied For ot Applicable		
Zip	Country	Zip	Coun	try		5. Certificate	of Status Desired		\$8.75 Add Fee Require			
	6. Name and Address of Current	Registered Agent				7. Name and	Address of New F	Registered A	\gent			
FLORIDA INSURANCE COMMISSIONER 200 E. GAINES STREET, LARSON BUILDING				Name Street Address (P.O. Box Number is Not Acceptable)								
TALLAHAS	SSEE, FL 32399-0319											
				City FL Zip Code				0				
	named entity submits this statement folions of registered agent.	or the purpose of changing its	registere	ed office or r	register	ed agent, or bot	h, in the State of FI	orida. I am f	amiliar with,	and accept		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	E: Registere	d Agent signature	bariuper a	when reinstating)		DATE				
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.	9. Election Campai Trust Fund Cont			\$5. Adde	00 May Be ed to Fees			-	`		
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	IÇERS AND	DIRECTOR	S IN 11		
TITLE	D	☐ Delete	TITLE	1					Change	■ Addition		
NAME OVERT ADDRESS	MARTIN, RODNEY O JR.		NAM									
STREET ADDRESS CITY-ST-ZIP	2929 ALLEN PKWY HOUSTON, TX 77019			ET ADDRESS -ST-ZIP								
TITLE	VCFO	Delete	TITLE									
NAME	FORTIN, MARY J	L Delete	11100						Chance	☐ Addition		
STREET ADDRESS			NAM	E					Change	☐ Addition		
CITY-ST-ZIP	2929 ALLEN PARKWAY			ET ADDRESS					☐ Change	Addition		
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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 it 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF	Randy Marash	04-22-08 Date	732-922-7400 Daytome Phone #
	CV March		0/ 00 00	700 000 7100

STREET ADDRESS

3600 ROUTE 66

NEPTUNE, NJ 07754