
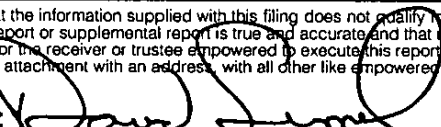



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90025 022 ***150.00

DOCUMENT # F04000003475					
1. Entity Name ENCOMPASS FLORIDIAN INDEMNITY COMPANY					
Principal Place of Business 2775 SANDERS ROAD NORTHBROOK, IL 60062-6127			Mailing Address 2775 SANDERS ROAD NORTHBROOK, IL 60062-6127		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 20-1110680			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	CPD WENDT, DOUGLAS R 2775 SANDERS ROAD NORTHBROOK, IL 600626127 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Young, Cynthia H-CP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 51 W. Higgins Rd. 3. Barrington, IL 60010		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SIMONSON, ERIC A 2775 SANDERS ROAD NORTHBROOK, IL 600626127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS NADIG, DAVID 2775 SANDERS ROAD NORTHBROOK, IL 600626127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD ZILS, JAMES P 2775 SANDERS ROAD NORTHBROOK, IL 600626127 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President & Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Verreys, Steven Carl 3075 Sanders Rd. Northbrook, IL 60062		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LESTON, KRISTEN E 2775 SANDERS ROAD NORTHBROOK, IL 600626127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		David Simek Authorized Representative 			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date _____ Daytime Phone # _____			

Appointment Report

ATTACHMENT

Printed

02/02/2006
9:30:57AM

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Name Encompass Floridian Indemnity Company

Reference ID

Officer Name	Appointment Type	Date Appointed
Cirincione, Lynn	Authorized Representative	10/18/2004
Simek, Dave	Authorized Representative	10/18/2004
Bufalino, Nancy M.	Assistant Treasurer	03/16/2005
Paul, Barry Sajowitz	Assistant Treasurer	03/19/2004
Leston, Kristine Ellen	Assistant Secretary	03/19/2004
McGinn, Mary Jovita	Assistant Secretary	07/30/2004
Derrig, Joanne Marie	Assistant Vice President and Chief Privacy Officer	03/19/2004
Gardner, Karen Cassidy	Vice President	03/19/2004
Kelaheer, John Terrence	Vice President	06/29/2005
LaMonica, Michael Anthony	Vice President	10/31/2005
Larson, Jane M.	Vice President	03/19/2004
Nadig, David Glenn	Vice President, General Counsel and Secretary	03/19/2004
Verney, Steven Carl	Vice President and Treasurer	03/16/2005
Pilch, Samuel Henry	Group Vice President and Controller	03/19/2004
Simonson, Eric Allen	Senior Vice President and Chief Investment Officer	03/19/2004
Hale, Danny Lyman	Chief Financial Officer	03/19/2004
LaMonica, Michael Anthony	Director	10/31/2005
Micheli, John W.	Director	06/29/2005
Young, Cynthia H.	Director	01/20/2006
Young, Cynthia H.	Chairman of the Board and President	01/20/2006