

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000005845

FILED
Oct 25, 2005
Secretary of State

Entity Name: NATIONAL FARMERS UNION PROPERTY AND CASUALTY COMPANY

Current Principal Place of Business:

11900 EAST CORNELL AVENUE
AURORA, CO 80014

New Principal Place of Business:

5619 DTC PARKWAY
SUITE 300
GREENWOOD VILLAGE, CO 80111

Current Mailing Address:

11900 EAST CORNELL AVENUE
AURORA, CO 80014

New Mailing Address:

5619 DTC PARKWAY
SUITE 300
GREENWOOD VILLAGE, CO 80111

FEI Number: 84-0982643

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: PETER F. SOUZA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERGMAN, ALAN
Address: RURAL ROUTE, BOX 10
City-St-Zip: JUD, ND 58454

Title: DP () Delete
Name: CARLSON, ROBERT L
Address: PO BOX 2136
City-St-Zip: JAMESTOWN, ND 584022136

Title: D () Delete
Name: CAVOORES, JOHN P
Address: ONE BEACON STREET
City-St-Zip: BOSTON, MA 02108

Title: D () Delete
Name: DAVIS, MORGAN W
Address: 9841 WEXFORD CIRCLE
City-St-Zip: GRANITE BAY, CA 95746

Title: D () Delete
Name: DEMBO, DAVID B
Address: ONE BEACON STREET
City-St-Zip: BOSTON, MA 02108

Title: DP () Delete
Name: FEDERICKESON, DAVID J
Address: 11900 EAST CORNELL AVENUE
City-St-Zip: AURORA, CO 880143194

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D/T (X) Change () Addition
Name: WARREN, RICHARD G
Address: 5619 DTC PARKWAY, SUITE 300
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: D/S (X) Change () Addition
Name: MALONEY, PETER T
Address: QBE REINSURANCE CORP, 88 PINE ST, #16
City-St-Zip: NEW YORK, NY 10005

Title: D/P (X) Change () Addition
Name: MACKEY, JERRY B
Address: 5619 DTC PARKWAY, SUITE 300
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: D (X) Change () Addition
Name: KENNY, TIMOTHY M
Address: QBE REINSURANCE CORP, 88 PINE ST, #16
City-St-Zip: NEW YORK, NY 10005

Title: D (X) Change () Addition
Name: FIORE, JAMES J
Address: QBE REINSURANCE CORP, 88 PINE ST, #16
City-St-Zip: NEW YORK, NY 10005

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: RICHARD G. WARREN

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10/25/2005

Electronic Signature of Signing Officer or Director

Date