2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000003402

Entity Name: ANCHOR GENERAL INSURANCE COMPANY

FILED Oct 11, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
10256 MEA SAN DIEGO	NLEY D, CA 92131					
Current Mailing Address:			New Mailir	New Mailing Address:		
P.O. BOX 5 SAN DIEGO	09020 D, CA 92150	9020				
FEI Number:	95-3634998	FEI Number Applied For()	El Number Not Appli	icable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
NRAI SER\ 2731 EXEC WESTON,	UTIVÉ PARI	CDR., SUITE 4 US				
The above in the State		submits this statement for the purp	oose of changing it	ts registered office or registered agent, or both,		
SIGNATURE: CHRISTIAN EUBANKS						
	Electro	nic Signature of Registered Agent		Date		
		93(2)(b), F.S., the corporation did not re ng Trust Fund Contribution ().	ceive the prior notice	е.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PC (BADANI, ABDU 10256 MEANL SAN DIEGO, C	EY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VD (KAISER, JOE 10256 MEANL SAN DIEGO, C		Title: Name: Address: City-St-Zip:	V (X) Change () Addition DIFABRIZIO, DON 10256 MEANLEY SAN DIEGO, CA 92131		
Title: Name: Address: City-St-Zip:	S (ALLEN, GRET 10256 MEANL SAN DIEGO, C	EY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (STOKES-GIBS 10256 MEANL SAN DIEGO, C	SON, SUSAN EY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (BADANI, SHAU 10256 MEANL SAN DIEGO, C	EY	Title: Name: Address: City-St-Zip:	O (X) Change () Addition ARVANITIS, GEORGE 10256 MEANLEY SAN DIEGO, CA 92131		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DV () Change (X) Addition VAN CLEAF, ANGIE 10256 MENLEY DR. SAN DIEGO, CA 92131		

I hereby certify that the information supplied with this filing does not qualify 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: GRETCHEN ALLEN S 10/11/2007