

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 17, 2008 8:00 am**  
**Secretary of State**

03-17-2008 90010 041 \*\*\*150.00

**DOCUMENT # F07000002372**

1. Entity Name  
**SIGNIFICA INSURANCE GROUP, INC.**



Principal Place of Business  
**19 NORTH MAIN STREET  
WILKES-BARRE, PA 18711**

Mailing Address  
**19 NORTH MAIN STREET  
WILKES-BARRE, PA 18711**

**40046584**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02062008

Chg-P

CR2E034 (12/06)

4. FEI Number

**59-0397210**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$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 STREET  
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

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 **C** ☐ Delete  
NAME **MOSES, JOHN P.**  
STREET ADDRESS **19 NORTH MAIN STREET**  
CITY-ST-ZIP **WILKES-BARRE, PA 18711**

TITLE **C/D** ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **APOSTOLICO, FRANK E.**  
STREET ADDRESS **19 NORTH MAIN STREET**  
CITY-ST-ZIP **WILKES-BARRE, PA 18711**

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

TITLE **D** ☐ Delete  
NAME **GRAHAM, JOHN H.**  
STREET ADDRESS **19 NORTH MAIN STREET**  
CITY-ST-ZIP **WILKES-BARRE, PA 18711**

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

TITLE **P** ☐ Delete  
NAME **CESARE, DENISE S.**  
STREET ADDRESS **19 NORTH MAIN STREET**  
CITY-ST-ZIP **WILKES-BARRE, PA 18711**

TITLE **Vice Chairperson/D** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **V** ☐ Delete  
NAME **KAMINSKAS, KAREN A.**  
STREET ADDRESS **19 NORTH MAIN STREET**  
CITY-ST-ZIP **WILKES-BARRE, PA 18711**

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

TITLE **S** ☐ Delete  
NAME **GOODLANDER, EDWIN R.**  
STREET ADDRESS **19 NORTH MAIN STREET**  
CITY-ST-ZIP **WILKES-BARRE, PA 18711**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**(See attached list)**

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:**

*Karen A. Kaminski*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/17/08**  
Date

**717-581-1300**  
Daytime Phone #

ATTACHMENT 40046584

#F07000002372

Significa Insurance Group, Inc.

**Officers and Board of Directors**

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**Officers:**

Chairman of the Board of Directors

John P. Moses

Vice Chairperson

Denise S. Cesare

President & CEO

Lucille M. Connors

Vice President – Finance, Treasurer & CFO

J. Kenneth Suchoski

Vice President – Insurance Operations

Karen Kaminskas

Vice President, General Counsel & Secretary

Edwin R. Goodlander, Esq.

**Board of Directors:**

John P. Moses, Chairperson

Frank E. Apostolico

Denise S. Cesare

John H. Graham

Gary F. Lamont

Richard K. Mangan

John J. Menapace

William C. Reed

J. Kenneth Suchoski