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F07000004384

Florida Department of State
Division of Corporations
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FOREIGN PROFIT/NONPROFIT CORPORATION

California Casualty Insurance Company

Certificate of Status	1
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August 29, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: CALIFORNIA CASUALTY INSURANCE COMPANY
REF: W07000042570

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Assistant secretary of CT Corporation can not sign on behalf of the Chief Financial Officer, please remove signature. Leave signature line blank.

If you have any further questions concerning your document, please call (850) 245-6934.

Loria Foole
Document Specialist
New Filing Section

FAX Aud. #: H07000216302
Letter Number: 307A00051885

P.O BOX 6327 - Tallahassee, Florida 32314

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

1. California Casualty Insurance Company

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

(State or country under the law of which it is incorporated)

3. 94-1662389

(FEI number, if applicable)

4. October 20, 1967

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1900 Alameda de las Pulgas, San Mateo, CA 94403

(Principal office address)

1900 Alameda de las Pulgas, San Mateo, CA 94403

(Current mailing address)

8. Property and Casualty Insurance

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Chief Financial Officer

Office Address: P.O. Box 6200, 200 E. Gaines Street

Tallahassee

(City)

Florida 32399

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: _____

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Refer to attached list

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Refer to attached list

Address: _____

Vice President: _____

Address: _____

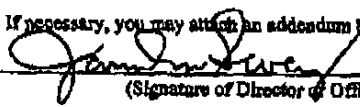
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. James Michael Sevey Secretary
(Typed or printed name and capacity of person signing application)

CCIC DIRECTORS	CCIC OFFICERS
Aaker, David A.	Brown, Carl B.
Altman, James D.	Ray, Michael A.
Brown, Jonathan	James M. Sevey
Cahill, Jr, Edward E.	
Dahlman, William R.	
Divney, Wayne S.	
Doggett, Carolyn E.	
Hamm, Jon H.	
Johnson, R. Wayne	
Lindsey, R. Kirk	
Parker, George*	
Phoebus, Edward G.	
Siegel, Lynne F.	
Tornatore, Ralph M.	
Zimmer, Suzane M.	

* Chairman of CCIC's Board

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**State of California
Secretary of State**

**CERTIFICATE OF STATUS
DOMESTIC CORPORATION**

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the 20th day of October, 1967, CALIFORNIA CASUALTY
INSURANCE COMPANY became Incorporated under the laws of the State of
California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended
on the records of this office; and

That according to the records of this office, the said corporation is authorized to
exercise all its corporate powers, rights and privileges and is in good legal
standing in the State of California; and

That no information is available in this office on the financial condition, business
activity or practices of this corporation.

IN WITNESS WHEREOF, I execute
this certificate and affix the Great Seal
of the State of California this day of
August 27, 2007.



Debra Bowen

DEBRA BOWEN
Secretary of State