

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002502

FILED
Feb 15, 2010
Secretary of State

Entity Name: PCH MUTUAL INSURANCE COMPANY, INC., A RISK RETENTION GROUP

Current Principal Place of Business:

607 14TH STREET, NW, SUITE 900
WASHINGTON, DC 20005

New Principal Place of Business:

Current Mailing Address:

C/O RISK SERVICES
1800 SECOND STREET, SUITE 909
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-1065673 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROGERS, MICHAEL T
1800 SECOND STREET, SUITE 909
SARASOTA, FL 34236 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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DP
Name: BLUMENFELD, EDGAR
Address: 134 N. LASAUE STREET
City-St-Zip: CHICAGO, IL 60602

Title: D
Name: HARVEY, MATT
Address: ONE WINDSOR WAY
City-St-Zip: PITTSBURGH, PA 15237

Title: DS
Name: RANDALL, CHRISTOPHER
Address: 300 WHITE OAK ROAD
City-St-Zip: LAWTON, MI 49065

Title: D
Name: FIRFER, RAYMOND
Address: 209 RIVERSHIRE LANE
City-St-Zip: LINCOLNSHIRE, IL 60069

Title: V
Name: SOUTHERLAND, BILL
Address: 2727 HAVEN DRIVE
City-St-Zip: EAGLE, ID 83616

Title: T
Name: GOLLA, BERT
Address: P.O. BOX TT371
City-St-Zip: SEATTLE, WA 98155

I hereby 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 all other like empowered.

SIGNATURE: TROY WINCH

OFFI

02/15/2010

Electronic Signature of Signing Officer or Director

Date