

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003919

FILED  
Mar 01, 2012  
Secretary of State

**Entity Name:** INDEMNITY COMPANY OF CALIFORNIA

**Current Principal Place of Business:**

17780 FITCH, SUITE 200  
IRVINE, CA 92614

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 19725  
IRVINE, CA 926239725

**New Mailing Address:**

PO BOX 19725  
IRVINE, CA 926239725 US

**FEI Number:** 95-2545113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES STREET  
TALLAHASSEE, FL 32399 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

**OFFICERS AND DIRECTORS:**

Title: CDS  
Name: CROWELL, HARRY C  
Address: 17780 FITCH, SUITE 200  
City-St-Zip: IRVINE, CA 92614 US

Title: PD  
Name: CROWELL, WALTER A  
Address: 17780 FITCH, SUITE 200  
City-St-Zip: IRVINE, CA 92614 US

Title: TD  
Name: ZAZA, SAM  
Address: 17780 FITCH, SUITE 200  
City-St-Zip: IRVINE, CA 92614 US

Title: VD  
Name: KERRIGAN, DAVID L  
Address: 17780 FITCH, SUITE 200  
City-St-Zip: IRVINE, CA 92614 US

Title: VD  
Name: PATE, STEPHEN T  
Address: 17780 FITCH, SUITE 200  
City-St-Zip: IRVINE, CA 92614 US

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: SAM ZAZA

VTD

03/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date