2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2000 8:00 am
Secretary of State
04-19-2000 90114 002 ***150.00

DOCUMENT # F93000000118

1. Entity Name

INFINITY SELECT INSURANCE COMPANY

Principal Place of Business	Mailing Address
2204 LAKESHORE DRIVE BIRMINGHAM AL 35283-0189	P.O. BOX 830189 BIRMINGHAM AL 35283-0189

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 31-1333017 ☐ 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
INSURANCE COMMISSIONER THE CAPITOL TALLAHASSEE FL 32399-0300	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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AMORY, ROBERT F ONE E. FOURTH STREET CINCINNATI OH 45202	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rosen, Eve Cutler 580 Walnut Street Cincinnati OH 45202	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD DIBBLE, WILLIAM H. 2204 LAKESHORE DRIVE BIRMINGHAM AL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Godwin, Glen N 2204 Lakeshore Drive Birmingham, AL 35209	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD GOBER, JAMES R 2204 LAKESHORE DR., SUITE 400 BIRMINGHAM AL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Kennedy, William R. 2204 Lakeshore Drive Birmingham, AL 35209	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD PRESTRIDGE, ROGER H 2204 LAKESHORE DR., SUITE 400 BIRMINGHAM AL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Williams, Shelia H. 2204 Lakshore Drive Birmingham, AL 35209	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VASD HORRELL, KAREN HOLLEY 580 WALNUT ST CINCINNATI OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Williamson, N. Chris 2204 Lakeshore Drive 35209 Birmingham, AL 35209	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOOVER, JOHN D ONE INDIANA SQUARE, SUITE 1800 INDIANAPOLIS IN 46204	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Roger H. Prestridge 4/6/00 205-870-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #