

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 19 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000006501 (0)

1. Corporation Name

CLASSIC FIRE & MARINE INSURANCE COMPANY

Principal Place of Business

8281 FOUNTAIN DRIVE  
SUITE A  
CROWN POINT IN 46307

Mailing Address

100 RIALTO PLACE  
SUITE 600  
MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/20/1994

4. FEI Number

36-3536176

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 1450-C Enea Circle

Suite, Apt. #, etc.

22 Suite 500

City & State

23 Concord, CA

Zip

24 94520

Country

25 USA

2a. Mailing Address

26 1450-C Enea Circle

Suite, Apt. #, etc.

27 Suite 500

City & State

28 Concord, CA

Zip

29 94520

Country

30 USA

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER  
CAPITOL  
TALLAHASSEE FL 32399-0300

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME RYAN, JAMES H  
STREET ADDRESS 1450-C ENEA CIRCLE, SUITE 500  
CITY-ST-ZIP CONCORD CA 94520 ☒ DELETE

TITLE D  
NAME MOWRY, EVA  
STREET ADDRESS 100 RIALTO PLACE, #600  
CITY-ST-ZIP MELBOURNE FL 32901 ☒ DELETE

TITLE VS  
NAME KRCHAK, LISA  
STREET ADDRESS 100 RIALTON PL STE 600  
CITY-ST-ZIP MELBOURNE FL ☒ DELETE

TITLE VD  
NAME BETHKE, BRIAN D  
STREET ADDRESS 1450-C ENEA CIRCLE, SUITE 500  
CITY-ST-ZIP CONCORD CA 94520 ☒ DELETE

TITLE D  
NAME KENNEDY, WILLIAM J  
STREET ADDRESS 551 CARNEGIE STREET  
CITY-ST-ZIP MANTECA CA 95337 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME Bob Roy  
1.3 STREET ADDRESS 1450-C Enea Circle, Suite 500  
1.4 CITY-ST-ZIP Concord, CA 94520 ☐ Change ☒ Addition

2.1 TITLE D  
2.2 NAME Bruce A. Ricci  
2.3 STREET ADDRESS 4040 Civic Center Drive, Suite 520  
2.4 CITY-ST-ZIP San Rafael, CA 94903 ☐ Change ☒ Addition

3.1 TITLE D  
3.2 NAME Haydon S. Leedy  
3.3 STREET ADDRESS 1450-C Enea Circle, Suite 500  
3.4 CITY-ST-ZIP Concord, CA 94520 ☐ Change ☒ Addition

4.1 TITLE S  
4.2 NAME Alexandra G. Jensen  
4.3 STREET ADDRESS 4318 Ligustrum Drive  
4.4 CITY-ST-ZIP Melbourne, FL 32934 ☐ Change ☒ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. Assistant to the Special

SIGNATURE Deputy Receiver

4/28/98

(925) 680-8630

CR2E034 (10/97)