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Mar 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000004825 (4)

1. Corporation Name

ST. PAUL MEDICAL LIABILITY INSURANCE COMPANY

Principal Place of Business

385 WASHINGTON ST.
ST. PAUL MN 55102

Mailing Address

385 WASHINGTON ST.
ST. PAUL MN 55102-1309



3. Date Incorporated or Qualified
10/03/1995

3a. Date of Last Report
04/22/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

41-1435768

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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 in provided space of registered agent and filer, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
D	ALBRECHT, SUSAN J	385 WASHINGTON ST.	ST. PAUL MN 55102	☐
D	BROWN, NICHOLAS M JR.	385 WASHINGTON ST.	ST. PAUL MN 55102	☒
V	ANDERSON, BRYAN V	385 WASHINGTON ST.	ST. PAUL MN 55102	☒
VS	BACKBERG, BRUCE A	385 WASHINGTON ST.	ST. PAUL MN 55102	☐
S	GERBER, EDWARD M	385 WASHINGTON ST.	ST. PAUL MN 55102	☐
V	DOUGLASS, A.I.	385 WASHINGTON ST.	ST. PAUL MN 55102	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
DV	Liska, P.J.	385 Washington Street	St. Paul, MN 55102	☐	☒
VT	Swanson, D.J.	385 Washington Street	St. Paul, MN 55102	☐	☒
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	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 do 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.

SIGNATURE: Edward M Gerber Edward M. Gerber, Asst. Corp. Secy 3/19/97 612-310-7911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)