

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 20, 2002 8:00 am**  
**Secretary of State**

02-20-2002 90037 006 \*\*\*150.00

**DOCUMENT # F95000006088**

1. Entity Name

**UNDERWRITERS INDEMNITY COMPANY**

Principal Place of Business

**8 GREENWAY PLAZA  
 STE 400  
 HOUSTON TX 77046  
 US**

Mailing Address

**9025 N. LINDBERGH DR  
 PEORIA IL 61615**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**76-0128873**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER  
 THE CAPITOL  
 PLAZA LEVEL II  
 TALLAHASSEE FL 32399-0300**

7. Name and Address of New Registered Agent

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, 2002 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	<b>P DIE, ROY C 8 GREENWAY PLAZA STE 400 HOUSTON TX 77046</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	<b>D MICHAEL, JONATHAN E 9025 N. LINDBERGH DR PEORIA IL 61615</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	<b>TD PRICE, MICHAEL A 9025 N. LINDBERGH DR PEORIA IL 61615</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	<b>D STONE, MICHAEL J 9025 N. LINDBERGH DR PEORIA IL 61615</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	<b>VSD HENSEY, KIM J 9025 N. LINDBERGH DR PEORIA IL 61615</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	<b>AV DENZER, CAROL J 9025 N. LINDBERGH DR PEORIA IL 61615</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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** *Jean M. Stephenson* **Jean M. Stephenson**  
 Sec. 1-30-02 (309) 692-1000 ext.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/01)

Underwriters Indemnity Company  
2002 Uniform Business Report

Attachment

Continuation of Questions 11 and 12:

#795000006088

Title	Name	Street Address	City/State
Director/ V.P./CFO	Joseph E. Dondanville	9025 N. Lindbergh Dr.	Peoria, IL 61615
Director/ VP Actuarial	Thomas V. Warthen	9025 N. Lindbergh Dr.	Peoria, IL 61615
VP/General Counsel	Mary Beth Nebel	9025 N. Lindbergh Dr.	Peoria, IL 61615
Asst Sec.	Jean M. Stephenson	9025 N. Lindbergh Dr.	Peoria, IL 61615
AVP/ Asst. Sec.	Greg E. Chilson	8 Greenway Plaza, Ste 400	Houston, TX 77046
Director	Michael E. Quine	9025 N. Lindbergh Dr.	Peoria, IL 61615
Asst Sec.	Paul M. O'Sullivan	8 Greenway Plaza Ste 400	Houston, TX 77046

4/10/90