

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90386 014 \*\*\*150.00

DOCUMENT # F96000000289

1. Entity Name

Compani on Property and Casualty Insurance  
Company



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

51 Clemson Road

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 100165

Suite, Apt. #, etc.

City & State

Columbia, SC

City & State

Columbia, SC

Zip

29229

Country

Zip

29202

Country

4. FEI Number

57-0768836

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

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

City

**FL**

Zip Code

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE Director  
NAME M. E. Sellers  
STREET ADDRESS 4645 Pine Grove Court  
CITY-ST-ZIP Columbia, SC

TITLE Director  
NAME Joseph F. Sullivan  
STREET ADDRESS 1 Kirkwood Street  
CITY-ST-ZIP Camden, SC

TITLE Director - Property & Casualty  
NAME Charles M. Potck  
STREET ADDRESS 311 East Springs Road  
CITY-ST-ZIP Columbia, SC

TITLE Secretary  
NAME Vivian B. Gray  
STREET ADDRESS 505 Woodlands Ridge Road  
CITY-ST-ZIP Columbia, SC

TITLE Treasurer  
NAME Robert A. Leichte  
STREET ADDRESS 8 Oak Bluff Court  
CITY-ST-ZIP Columbia, SC

TITLE Director  
NAME Judith M. Davis  
STREET ADDRESS 5123 Lakeshore Drive  
CITY-ST-ZIP Columbia, SC

TITLE  
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/06

Date

(803) 735-0672

Daytime Phone #

ATTACHMENT

40075613

# F9602000029

**Uniform Business Report (UBR) – Page 2**

Additional Officers/Directors

Companion Property and Casualty  
51 Clemson Road  
Columbia, SC 29229  
FEI Number #57-0768836

Director

William R. Shrader  
2828 Gervais Street  
Columbia, SC

Director

William J. Meyer  
2737 Cypress Bend Road  
Florence, SC

Director

Stephen K. Wiggins  
510 Winding Way  
Columbia, SC

ATTACHMENT

40075013

# F96000000289



**Companion Property & Casualty Group**

**Companion Property & Casualty**  
Insurance Company

**Companion Commercial**  
Insurance Company

April 19, 2006

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Dear Sir or Madam:

Enclosed is the 2006 Uniform Business Report for **Companion Property and Casualty Insurance Company**. The filing fee of \$150 is included.

If you have questions or need additional information, please contact me at 1-800-845-2724, extension 45608. Thank you.

Sincerely,

Pamela C. Johnson  
Finance Supervisor