⇒ PROFIT CORPORATION[®] ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600001430 1. Corporation Name

PENN CHARTER MUTUAL INSURANCE COMPANY

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2 N. Broad St Lititz pa 07543-7007
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1 ITIT7 PA በንፍልዩ-ንበበን
CITIZ FR 0/340*/00*

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

PO BOX 900 LITITZ PA 17543-7007

26

FILED Mar 23, 1999 8:00 am Secretary of State 03-23-1999 90044 011 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

03/15/1996

23-0953470

4. FEI Number

2		12/							
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution		May Be
3		28	 -		Causatan				
_ Zip ─	Country		Zip	-	Country		8. This corporation owes the curre	ent year intangible \[\text{\text{Yes}}	□No
24	25	29		30	<u> </u>		Personal Property Tax. 10. Name and Address of New R		
	9. Name and Address of Curren	t Regis	stered Agent		81	Name	IV. Name and Address of New P	egisteren Agent	
					0'	Name			
INSURANCE COMMISSIONER					82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)	
CAPITOL BLDG									
TALL	AHASSEE FL 32399-0300				83				
	4 14 1 4 2 E.				84	City	<u> </u>	85 Zir	p Code
					٦	City		FL " - '	
office or f	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	da. Such chang	ie was autho	orizeo dy	tne corporation	oration submits this statement for the on's board of directors. I hereby accep	t the appointment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title	if applicable.	(NOTE: Reg	<u>_</u>	nt signature require	d when reinstating)	DATE	TODO IN 10
12.	OFFICERS AN	1D DIRE			13.		ADDITIONS/CHANGES TO OF		
TITLE	CD Let		☐ DI	LETE	1.1 TITLE		•	☐ Change	e
NAME	HORST, CLYDE W				1.2 NAME				
STREET ADDRESS	2155 WATERFORD DR				1.3 STREET	TADDRESS			
CITY-ST-ZIP	LANCASTER PA 17601				1.4 CITY-S	T-ZIP			-
TILE	PCEO		DI	ELETE	2.1 TITLE			☐ Change	e
NAME	GIBBEL, HENRY H				2.2 NAME				
STREET ADDRESS					2.3 STREET	TADORESS			
CITY-ST-ZIP	LITITZ PA 17543				2.4 CITY-5	ST-ZIP			
ÎME	D		□ 0	ELETE	3.1 TITLE			☐ Change	e 🗌 Addition
NAMÉ	GIBBEL, HENRY H				3.2 NAME				
STREET ADDRESS					3.3 STREE	T ADDRESS			
	LITITZ PA 17543		•		3.4. CITY-5			•	
CITY-ST-ZIP TITLE	SVD :		□ D:	ELETE	4.1 TITLE			☐ Change	e
NAME			_ -		4.2 NAME				
: VWIL						1			
CTREET ANDRESS	GIBBEL, HENRY R			1	43 STREE	TADDRESS			
STREET ADDRESS	244 HICKORY DR					T ADDRESS			
CITY-ST-ZIP	244 HICKORY DR LITTZ PA 17543		<u> </u>	ELETE	4.4 CITY-S		<u> </u>	Chang	e Addition
CITY-ST-ZIP	244 HICKORY DR LITITZ PA 17543 VD		[C	ELETE			<u></u>	☐ Chang	e Addition
CITY-ST-ZIP TITLE NAME	244 HICKORY DR LITITZ PA 17543 VD GIBBEL, JOHN R		Q	ELETE	4.4 CITY-S 5.1 TITLE 5.2 NAME		<u>. </u>	Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	244 HICKORY DR LITITZ PA 17543 VD GIBBEL, JOHN R 828 BALLSTOWN RD		[] DI	ELETE	4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE	TADORESS .	<u>.</u>	☐ Chang	e Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	244 HICKORY DR LITITZ PA 17543 VD GIBBEL, JOHN R 828 BALLSTOWN RD LITITZ PA 17543				4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	TADORESS .			
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indicated on this annual report or supplied with this liming does not quality for the exemption stated in Section 1.18.07(5)(f), Florida Statutes. I notice continue 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, with all other like empowered.

SIGNATURE:

PENN CHARTER MUTUAL INSURANCE COMPANY 2 NORTH BROAD STREET, P O BOX 900 LITITZ PENNSYLVANIA 17543-7007 (717) 626-4751

#12 Florida:

CLYDE W. HORST -

2155 Waterford Drive, Lancaster, PA 17601

Chairman/Director

HENRY H. GIBBEL -

11 East Third Avenue, Lititz, PA 17543

President/CEO/Director

HENRY R. GIBBEL -20 East Fourth Avenue, Lititz, PA 17543

Secretary/Sr. Vice President, Insurance Operations/Director

JOHN R. GIBBEL -

Box 16, Lititz, PA 17543

Vice President/General Counsel/Director

PAUL G. HESS -

92 St. Mark Avenue, Lititz, PA 17543

Director

LARRY D. SAUDER -

690 Orchard Road, Box 306, Manheim, PA 17545

Director

JACK S. WATSON -

125 West Lemon Street, Lititz, PA 17543

Director

GLENN H. SHELLY -

7 Penny Lane, Lititz, PA 17543

Treasurer/Vice President, Finance

RICHARD O. BROWN -

Vice President, Office Services

10 Pfautz Avenue, Lititz, PA 17543

CHARLES A. MICHAEL -

Vice President, Underwriting

209 Oxford Drive, Lititz, PA 17543

LYDIA M. STEPHAN -

Vice President, Information Systems

4 Meadowbrook Lane, Lititz, PA 17543

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