

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000001430

1. Entity Name

PENN CHARTER MUTUAL INSURANCE COMPANY

Principal Place of Business

2 N. BROAD ST
LITITZ PA 07543-7007

Mailing Address

PO BOX 900
LITITZ PA 17543-7007

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-0953470

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32399-0300

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, 2000 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD HORST, CLYDE W 2155 WATERFORD DR LANCASTER PA 17601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO GIBBEL, HENRY H 11 E. 3RD AVE LITITZ PA 17543	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIBBEL, HENRY H 11 E. 3RD AVE LITITZ PA 17543	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD GIBBEL, HENRY R 244 HICKORY DR LITITZ PA 17543	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GIBBEL, JOHN R 828 BALLSTOWN RD LITITZ PA 17543	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HESS, PAUL G 514 S. BROAD ST LITITZ PA 17543	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

20 East Fourth Avenue

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GLENN H. SHELLY, CPA

FEBRUARY 22, 2000

Date

717-626-4751

Daytime Phone #

00029322



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)

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

*Attachment
00029522
#F96000001430*

#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
Vice President, CFO & Treasurer**

**RICHARD O. BROWN - 10 Pfautz Avenue, Lititz, PA 17543
Vice President, Office Services**

**CHARLES A. MICHAEL - 209 Oxford Drive, Lititz, PA 17543
Vice President, Underwriting**

**LYDIA M. STEPHAN - 4 Meadowbrook Lane, Lititz, PA 17543
Vice President, Information Systems**