

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 06, 2002 8:00 am**  
**Secretary of State**

03-06-2002 90064 006 \*\*\*150.00

**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

**INSURANCE COMMISSIONER  
 CAPITOL BLDG  
 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

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 20 EAST FOURTH AVENUE 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

*Shelly, CPA, VP&CFO*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/02

Date

717-626-4751

Daytime Phone #

CR2E034 (9/01)

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

BW37845

*Attachment & Ac #*  
*F96000001430*

#12 Florida:

**CLYDE W. HORST -**  
Chairman/Director

2155 Waterford Drive, Lancaster, PA 17601

**HENRY H. GIBBEL -**  
President/CEO/Director

11 East Third Avenue, Lititz, PA 17543

**HENRY R. GIBBEL -**  
Secretary/Executive Vice President

20 East Fourth Avenue, Lititz, PA 17543

**JOHN R. GIBBEL -**  
Vice President/General Counsel/Director

Box 16, Lititz, PA 17543

**PAUL G. HESS -**  
Director

92 St. Mark Avenue, Lititz, PA 17543

**LARRY D. SAUDER -**  
Director

690 Orchard Road, Box 306, Manheim, PA 17545

**JACK S. WATSON -**  
Director

125 West Lemon Street, Lititz, PA 17543

**GLENN H. SHELLY -**  
Vice President, CFO & Treasurer

7 Penny Lane, Lititz, PA 17543

**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