# 2002 Uniform Business Report (UBR)

#### Mar 27, 2002 8:00 am Secretary of State DOCUMENT # F98000005194 1. Entity Name 03-27-2002 90093 027 \*\*\*150.00 CROP GROWERS INSURANCE SERVICES, INC. Principal Place of Business Mailing Address 777 SAN MARIN DRIVE 777 SAN MARIN DRIVE NOVATO CA 94998-1000 NOVATO CA 94998-1000 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 91-0981274 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KUSHNER, BETSY L Street Address (P.O. Box Number is Not Acceptable) FIREMAN'S FUND INSURANCE COMPANIES 4301 ANCHOR PLAZA PARKWAY TAMPA FL 33634 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete Addition TITLE TITLE ☐ Change PCE0 NAME NAME CHAPMAN, JOHN J STREET ADDRESS STREET ADDRESS 1126 MEADE AVENUE CITY-ST-ZIP CITY-ST-ZIP PROSSER WA 99350 TITLE ☐ Delete TITLE ☐ Change Addition VT NAME NAME MARSH, HAROLD STREET ADDRESS STREET ADDRESS 777 SAN MARIN DRIVE CITY-ST-ZIP CITY-ST-ZIP NOVATO CA 94998 ☐ Delete Change ☐ Addition TITLE TITLE KLOENHAMER, JANET S STREET ADDRESS STREET ADDRESS 777 SAN MARIN DRIVE CITY-ST-ZIP CITY-ST-ZIP **NOVATO CA 94998** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME OWENS, JOHN J STREET ADDRESS STREET ADDRESS 10895 LOWELL, STE 300 CITY-ST-ZIP CITY-ST-ZIP OVERLAND PARK KS 66210 Delete AS TITLE TITLE ☐ Change Addition Julie A. Garrison NAME NAME HOLLAND, JANET M STREET ADDRESS STREET ADDRESS 777 San Marin Drive 777 SAN MARIN DRIVE CITY-ST-ZIP CITY-\$T-ZIP NOVATO CA 94998 Novato CA 94998 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

SIGNATURE:

changed, or on an attachment with an address

with all other like empowered.

03/13/02

(415) 899-2000

FILED

Daytime Phone #

CR2E034 (9/01)

attachment #F980000005194/

CROP GROWERS INSURANCE SERVICES, INC. (formerly known as Chapman Lampson, Inc.) (Subsidiary of Crop Growers Corporation)

PURPOSE: Insurance Agency and Insurance Brokerage business

### DIRECTORS

Joseph F. Dillon Jr. \*\*
Harold N. Marsh, III \*\*

John J. Owens \*
Jeffrey H. Post \*\*
Steven B. Resnick \*\*

## ELECTED OFFICERS

John J. Owens
John J. Chapman, Jr.\*\*\*

Harold N. Marsh, III

Janet S. Kloenhamer \*\*

Chairman of the Board
President and
Chief Executive Officer
Executive Vice President and
Treasurer

Corporate Secretary

# APPOINTED OFFICERS

Julie A. Garrison

Assistant Secretary

All of the above are located at:

- \* 10895 Lowell Avenue, Suite 300, Overland Park KS 66210
- \*\* 777 San Marin Drive, Novato CA 94998
- \*\*\* at Home office address: 1126 Meade Avenue, Prosser WA 99350