

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000995

Entity Name: CORE INSURANCE COMPANY

FILED
Apr 17, 2006
Secretary of State

Current Principal Place of Business:

101 MERRITT 7 CORPORATE PARK
6TH FLOOR
NORWALK, CT 06851

New Principal Place of Business:

5200 METCALF
PO BOX 2991
OVERLAND PARK, KS 66201

Current Mailing Address:

5200 METCALF
P O BOX 2991
OVERLAND PARK, KS 66201

New Mailing Address:

FEI Number: 03-0350908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: TURIANO, MICHAEL
Address: 131 CHURCH ST
City-St-Zip: BURLINGTON, VT 05401

Title: DVS () Delete
Name: KEHRWALD, FRANCIS J
Address: 5200 METCALF
City-St-Zip: OVERLAND PARK, KS 66202

Title: T () Delete
Name: HOLFERTY, KENNETH J
Address: 5200 METCALF
City-St-Zip: OVERLAND PARK, KS 66202

Title: C () Delete
Name: KROGULL, KURTIS
Address: 5200 METCALF
City-St-Zip: OVERLAND PARK, KS 66202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KURT KROGULL

C

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date