FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 11, 2002 8:00 am Secretary of State

U	NILOKW ROZÍVI	E22 KEPUKI	(UBK)		Wiai 11, 200			
DOCUI	MENT # 143055			Secretary of State 03-11-2002 90073 012 ***150.00				
Entity Nam		,						
•	Employers Mutua	1, Inc.						
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		·			. –			
	DO NOT WRITE	: IN THIS SF	PACE					
•						•		
Principal Place of Business Mailing Address								
1000 Riverside Avenue		225 Water Stre	225 Water Street					
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE			
4th Flo		Suite 1400		4. FEI Number Apr				
City & State Jacksonvillé, Florida Jacksonvill			. Florida		59-2989676 Not Applicable			
- CEROVIII A		Zip	Country		5. Certificate of Status Desired \$8.75 Additional			
	.204 USA	32202	USA			Fee Required		
			Nome	7. N	ame and Address of Current Registere	d Agent		
. 			Name	Charle:	s=Divita; III			
	DO NOT W	KIIE	Street Ad	Street Address (P.O. Box Number is Not Acceptable) 1000 Riverside Avenue				
IN THIS SPACE								
		/\\\		4th Floor				
			City	Jackson	oville FL	Zip Code 32204		
R The above	named entity submits this statement for	or the purpose of changing its	registered office or	registered ag	gent, or both, in the State of Florida.			
	0/1000	, ,			,	,		
SIGNATURE .	(Kulle Disto	77 Charles	s Di <mark>vita, I</mark>	II, SV	$P \& COO \qquad \qquad 2/2/2$	102		
SIGIVATORIE .	signature, typed or printed name of registered agent	and title if applicable. (NOTE	E: Registered Agent signatur	e required when o	einstating) DATE			
9. This corporation is eligible to satisfy its intartigible After May 1, F			lay 1 Fee is \$150	.00	10. Election Campaign Financing	\$5.00 May Be		
			1, Fee IS \$550.00 1 UBR is \$61.25					
(See criter	ria on back)	Make Check Payab		of State				
11.	OFFICERS AND	DIRECTORS	<u> </u>					
TITLE	D/S		TITLE NAME					
NAME STREET ADDRESS	Cown, Roberta Goes 225 Water Street, S	1400	STREET ADDRESS		•			
CITY-ST-ZIP	Jacksonville, Flori		CITY-ST-ZIP		•			
TITLE	D/P/CEO	MA JELVE	TITLE					
NAME	Mueller, Markus		NAME					
STREET ADDRESS	700 Central Parkway	,	STREET ADDRESS					
CITY-ST-ZIP	Stuart, Florida 349		CITY-ST-ZIP			<u></u>		
TITLE	D		TITLE					
NAME	Rader, David L.		NAME CTREET ADDRESS			·		
STREET ADDRESS	1000 Riverside Aven	=	STREET ADDRESS CITY-ST-ZIP		DO NOT WR	TE		
	Jacksonville, Flori D/VP	da 32204	TITLE		111 71110 004	^F		
TITLE Name	Thorpe, Kim D.		NAME		IN THIS SPA	CE		
STREET ADDRESS	225 Water Street, S	Suite 1400	STREET ADDRESS					
CITY-ST-ZIP	Jacksonvilel, Flori		CITY-ST-ZIP					
TITLE	SVP/COO		TITLE					
NAME	Divita, III, Charle	es	NAME					
STREET ADDRESS	1000 Riverside Aven		STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP	Jacksonville, Flori	ida 32204 —						
TITLE	VP/CFO		TITLE : NAME					
NAME Street address	Palmer, Clark		STREET ADDRESS					
CITY-ST-ZIP	700 Central Parkway Stuart, Florida 349		CITY-ST-ZIP					
	<u> </u>	7 4						

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/02

(904) 354-2482

Daytime Phone *ext. 3287

Attachment #1,43056

CONTINUATION OF NUMBER 11

11.	OFFICERS AND DIRECTORS	12.	OITIONS/CHANGES TO ICERS AND DIRECTORS IN 11
Title	VP		
Name	Hampel, William		
St. Address	700 Central Parkway		
City-ST-Zip	Stuart, Florida 34994		
Title	VP		
Name	Bowen, Patrick		
-St. Address-	-700 Central Parkway	وفلامت والتعطين	
City-ST-Zip	Stuart, Florida 34994		
Title	AS		
Name	Parks, Peggy A.		
St. Address	225 Water Street, Suite 1400		
City-ST-Zip	Jacksonville, Florida 32202		



February 22, 2002

Division of Corporations Uniform Business Report Filings Post Office Box 1500 Tallahassee, Florida 32302-1500

Re: Employers Mutual, Inc. (L43055)

Dear Sir/Madam:

Enclosed for filing is the 2002 Uniform Business Report for Employers Mutual, Inc., together with our check in the amount of \$150.00 representing the required filing fee.

Please call me if you have any questions.

Yours truly, Plaggy a. Packs

Peggy A. Parks

Assistant Corporate Secretary/ Director of Paralegal Services

Enclosure (Check No. 018418)