

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2001 8:00 am
Secretary of State

03-21-2001 90044 036 ***150.00

DOCUMENT # P02475

1. Entity Name

SAFECO INSURANCE COMPANY OF ILLINOIS

Principal Place of Business

Mailing Address

**SAFECO PLAZA
SEATTLE WA 98185**

**REGULATORY COMPLIANCE
SAFECO PLAZA
SEATTLE WA 98185
US**

A0035465



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2800 WEST HIGGINS ROAD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 1100

City & State

City & State

HOFFMAN ESTATES, IL

4. FEI Number **91-1115311**

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

**FLORIDA INSURANCE COMMISSIONER
THE CAPITOL BUILDING
TALLAHASSEE FL 32301**

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, 2001 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 **P** ☒ Delete
NAME **STODDARD, W. RANDALL**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE WA 98105**

TITLE **P** ☐ Change ☒ Addition
NAME **MICHAEL S. McGAVICK**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE, WA 98105-9903**

TITLE **SVP** ☒ Delete
NAME **CHAPMAN, DONALD S.**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE WA 98105**

TITLE **EV** ☐ Change ☒ Addition
NAME **WILLIAM T. LEBO**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE, WA 98105-9903**

TITLE **VS** ☐ Delete
NAME **PIERSON, RODNEY A.**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE WA 98105**

TITLE **SV/S** ☒ Change ☐ Addition
NAME **SV**
STREET ADDRESS **SEATTLE, WA 98105-9903**

TITLE **VT** ☒ Delete
NAME **BAUER, STEPHEN C**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE WA 98105**

TITLE **SV** ☐ Change ☒ Addition
NAME **DONALD S. CHAPMAN**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE, WA 98105-9903**

TITLE **T** ☒ Delete
NAME **BROWNE, WAYNE T**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE WA 98105**

TITLE **V/T** ☐ Change ☒ Addition
NAME **STEPHEN C. BAUER**
STREET ADDRESS **601 UNION ST., SUITE 2500**
CITY-ST-ZIP **SEATTLE, WA 98101-4074**

TITLE **AS** ☐ Delete
NAME **EGAN, RAY**
STREET ADDRESS **4333 BROOKLYN AVE NE**
CITY-ST-ZIP **SEATTLE WA 98105**

TITLE ☒ Change ☐ Addition
NAME **RAY M. EGAN**
STREET ADDRESS **SEATTLE, WA 98105-9903**

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:

Ray M. Egan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAY M. EGAN, ASST. SEC.

February 23, 2001

(800) 544-2614

CMPLNC@SAFECO.COM

Daytime Phone #

CR2E034 (10/00)

Attachment
D/F 002475
AW35468

SAFECO INSURANCE COMPANY OF ILLINOIS

Michael S. McGavick		President
William T. Lebo		Executive V.P.
Richard R. Berls		Sr. V.P.
Donald S. Chapman		Sr. V.P.
Peter E. Dunn		Sr. V.P.
Dale E. Lauer		Sr. V.P.
Rod A. Pierson		Sr. V.P., Secretary
James A. Schmidt		Sr. V.P.
Robert C. Taylor		Sr. V.P., Sr. Associate General Counsel
William E. Thomas		Sr. V.P.
Stephen C. Bauer		V.P., Treasurer
William J. Carron		V.P.
Stephen D. Collier		V.P., Asst. Secy.
Alvin W. Dorow		V.P.
John L. Elwell		V.P.
David W. Kraft	*	V.P., Controller, Asst. Secretary
H. Paul Lowber		V.P., Asst. Secy.
Darcy S. MacLaren		V.P.
Tim Mikolajewski		V.P.
Ronald L. Spaulding		V.P.
James C. Stiegler		V.P.
Ronald W. Sepanski	*	Regional V.P.
Michael Anderson		Asst. V.P., Asst. Secy., Asst. Controller
Richard M. Chyba		Asst. V.P.
David Mandt		Asst. V.P.
Patty J. McCollum		Asst. V.P.
James G. Schmidt		Asst. V.P., Asst. Secy.
Scott M. Byrne	*	Asst. Secy.
Ray M. Egan		Asst. Secy.
Neal A. Fuller		Asst. Secy.
Susan Tracey		Asst. Secy.
Bradford K. Young		Asst. Secy.
Gary A. Shane		Asst. Controller
William Gatewood	*	
Jeffrey Jarka	*	
Timothy M. Williams	*	

* = Denotes Director

SAFECO Insurance Company of Illinois 100% owned by SAFECO Corporation. The actual location of SAFECO Insurance Company of Illinois is: 2800 West Higgins Road, Suite 110, Hoffman Estates, IL 60195-5205. The mailing address is: Regulatory Compliance, SAFECO Plaza, Seattle, WA 98185-0001 and the email address is cmplnc@safeco.com.

DATED: February 16, 2001