## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Saridra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P05382 DOCUMENT # COMMUNITY NATIONAL ASSURANCE COMPANY Principal Place of Business Mailing Address 250 OLD WILSON BRIDGE ROAD 250 OLD WILSON BRIDGE ROAD PO BOX 10 PO BOX 10 WORTHINGTON OH 43085-0010 WORTHINGTON OH 43085-0010 3. Date Incorporated or Qualified 03/21/1985 3a. Date of Last Report 02/21/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 31-0628424 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zg: Country Ζıρ Country 8. This corporation has liability for intangible tax under s 199.032, 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE FLORIDA INSURANCE COMMISSIONER 82 Street Address (P.O. Box Number is Not Acceptable) THE CAPITOL BUILDING TALLAHASSEE FL 32399 83 84 Crty Zip Code 85 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. Supportion, type that pentilial nation of registered agent architect apply table (NOTE Fingistered Agent signature required when reinstating OFFICERS AND DIRECTORS 13. CR2E034 (12/95 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 □ DELETE 1 1 TITLE Change Addition GAINOR, JOHN JOSEPH 1.2 NAME 8960 SALTCOATS CT. STREET 400RESS 1.3 STREET ADDRESS DUBLIN OH COTY-ST ZIE 14 CITY - ST- ZIP TD K) DELETE 2 1 TIFLE Change X Addition MILNES, WILLIAM R. 2.2 NAME Martin, George Dominic 331 SUNNY ACRES STREET ADDRESS 2.3 STREET ADDIRESS 3197 Smokey Ridge Lane CINCINNATI OH City Styzie 2.4 CITY-S1-7IP Carmel IN 46033 K) DELETE 3 1 THILE Change Addition HEIRD, ROBERT C. 3.2 NAME Miller, Sandra Hamilton 113 LAKEVIEW CT. STREET ALIDRESS 3.3 STREET ADDRESS 910 Ridge Drive LOVELAND OH CHY-\$1-20-3.4 CITY - ST - ZIP Greenfield IN K) DELETE 4 1 III LE C/D ☐ Change HOUSER, DWANE RUSSELL **X** Addition 4.2 NAME Bow, Stephen Tyler 9842 FORESTGLEN DRIVE STREET ADDRESS 4.3 STREET ADDRESS 179 Stewart Drive **CINCINNATI OH** CITY-ST ZIF 4.4 CITY - ST - ZIP Tiburon CA CD R DELETE 5 1 THEF □ Change Addition BRUECKNER, STEFEN F. 5.2 NAME Farris, Bain Joseph 4745 BURLEY HILLS DR. STREET ADDRESS 5.3 STREET ADDRESS 5430 Washington Blvd. CINCINNATI OH CITY - ST 20 5 4 CITY - ST - ZIP Indianapolis IN 46220 AS DELFTE 6 1 DILE Change ☐ Addition SWINGLE, KRISTAN 62 NAME 5381 BRAND ROAD STREET ADDRESS 63 STREET ADDRESS 5281 Brand Road **DUBLIN OH** 0(1) - S1 - Z(F) 6 4 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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

SIGNATURE:

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IGNATURE AND TYPED O FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13 if changed, or on an ay ichment with an address

March 6, 1996

(614) 436-0688

Daytime Priorie #



Community National Assurance Company 250 Old Wilson Bridge Road P.O. Box 10 Worthington, OH 43085 614 • 436 • 0688

## Attachment to 1996 Profit Corporation Annual Report Florida Department of State

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

7.2 7.3	TITLE NAME STREET ADDRESS CITY ST ZIP	AT (Assistant Treasurer) Gallina, John Edward 7116 Winding Brook Court Columbus OH 43235	Change	X Addition
8.2 8.3	TITLE NAME STREET ADDRESS CITY ST ZIP	D Schifano, Thomas Joseph 8500 Spruce Hill Road Prospect KY	Change	X Addition
_	TITLE NAME STREET ADDRESS CITY ST ZIP	D Sheridan, Patrick Michael 8152 Dean Road Indianapolis IN 46240-2918	Change	X Addition