|  | E NOW: FILING  | i FEE AFIER           | MAY 1 I                         | S \$225.00  | ^  | 4.0.0   |
|--|--|-----------------------|---------------------------------|---|--|---|
| COF<br>ANNU  | PROFIT<br>RPORATION<br>JAL REPORT (<br><b>1996</b>   |                       | Sandra<br>Secreta               | RTMENT OF STATE  B. Mortham  Iry of State  CORPORATIONS   | Pa   | je 182  |
|  |  | 3970                  | (9)                             |   |  |   |
| 1. Corporation   | n Name   | · - <del>-</del>      | (0)                             |   |  |   |
| IHE S  | SHELBY INSURANCE   | COMPANY               | •                               | 4   | 180128813011118811110 18111 181  |   |
| Principal Place  | of Business  | Mailing A             | ddress                          |   |  | <b>                                  </b>   |
| ALIFE BUL OLD SAME ALON  |  |                       | ANSFIELD AVE.<br>Y OH 44875-046 | 7   |  |   |
| 2. Propinal Pla  | ace of Rusinose  | 2a Massa              | Addison                         |   | 3. Date incorporated or Qualified 04/08/1987   | 3a. Date of Last Report 05/01/1995  |
| 21   | 2. Principal Place of Business 2a<br>26  |                       | g Address                       |   | 4. FEI Number 34-1532771   | Applied For Not Applicable  |
| Suite, Apt.  | #, etc.  | <del> </del>          | Apt. #, etc.                    | ·   | 5. Certificate of Status Desired   | \$8.75 Additional   |
| City & State   | )  | 27   City 8           | State                           |   | Election Campaign Financing  | Fee Required  |
| Zip  |  | 28                    |                                 | I   | Trust Fund Contribution  | S5.00 May Be Added to Fees  |
| 24   | Country<br>25  | Zip<br>29             |                                 | Country<br>30   | 8. This corporation has liability for Florida Statutes                                 | intangible tax under s 199.032,<br>∏No  |
|  | 9. Name and Address  | of Current Registered | gent                            |   | 10. Name and Address of New F  |   |
| EI ADID  | A INSURANCE COMMIS   | PEIONED               |                                 | 81 Name   |  |   |
|  | A INSURANCE COMMIS<br>L BEDG.  | STUNER                |                                 | 82 Street Add   | ress (P.O. Box Number is Not Acceptat  | le)   |
|  | IASSEE FL 32301  |                       |                                 | 83  |  |   |
|  |  |                       |                                 | 84 City   |  | 85 Zip Code   |
| 11. Pursuant to  | o the provisions of Sections   | 607.0502 and 607.1508 | Florida Statutes                | the shove named corre   | ration submits this statement for the pur  | FL  |
|  | ed agent, or both, in the Sta<br>h, and accept the obligation:   |                       |                                 | by the corporation's boa  | ration submits this statement for the pur<br>and of directors. I hereby accept the app | pose of changing its registered office<br>pintment as registered agent. I am        |
| SIGNATURE  |  |                       |                                 |   |  |   |
| 12.  | Signature, typed or printed name of reg<br>OFFK  | CERS AND DIRECTORS    | (NOTE                           | Registered Agent signature require 13.  | nd when reinstating! ADDITIONS/CHANGES TO OFF  | CERS AND DIRECTORS IN 12  |
| TITLE  | PD   | -                     | DELETE                          | 1 1 TITLE   |  | ☐ Change ☐ Addition   |
| NAME   | BROOKS, ROBERT (   |                       |                                 | 1.2 NAME  | Λ  | _   |
| STREET ADDRESS   | 175 MANSFIELD AVE  | <b>.</b>              |                                 | 1.3 STREET ADDRESS  | Dee Attach   | PC  |
| CITY - \$1 - 71D   |  |                       |                                 |   | 7  |   |
| CITY-ST-ZIP<br>THILE   | V SHELBY OH  |                       | DELETE                          | 1.4 C/TY - ST - Z/P<br>2. 1 T/T/LF  | Jee maan   |   |
|  | V<br>JUNGEBERG, THOM   | AS D.                 | <b>⊠</b> D€LETE                 |   | JCC / IT IUCH  | Change Addition   |
| THLE<br>NAME<br>STREET ADDRESS   | V<br>JUNGEBERG, THOM<br>175 MANSFIELD AVE  | AS D.                 | <b>⊠</b> DELETE                 | 2. 1 TITLE  | JCC / ITIALIT  |   |
| TITLE<br>NAME  | V<br>JUNGEBERG, THOM   | AS D.                 |                                 | 2.1 Title<br>2.2 Name<br>2.3 Street Address<br>2.4 City-St-Zip  | JCC / II Idon  | ☐ Change ☐ Addition   |
| THLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | V<br>JUNGEBERG, THOM<br>175 MANSFIELD AVE  | AS D.                 | DELETE                          | 2.1 TITLE<br>2.2 NAME<br>2.3 STREET ADDRESS   | JCC / II Idon  |   |
| THILE NAME STREET ADDRESS CITY - ST - ZIP TITLE  | V<br>JUNGEBERG, THOM<br>175 MANSFIELD AVE<br>SHELBY OH<br>V<br>ADKINS, GREGORY<br>175 MANSFIELD AVE  | AS D.<br>E            |                                 | 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 City-St-Zip 3.1 Title   | JCC / II Idon  | ☐ Change ☐ Addition   |
| ITILE NAME STREET ADDRESS CITY-ST-ZAP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | V<br>JUNGEBERG, THOM<br>175 MANSFIELD AVE<br>SHELBY OH<br>V<br>ADKINS, GREGORY<br>175 MANSFIELD AVE<br>SHELBY OH   | AS D.                 | ] DELETE                        | 2. 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP 3. 1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP   | JCC / II Idon  | Change Addition   |
| THILE  NAME  STREET ADDRESS  CITY - ST - ZAP  THILE  NAME  STREET ADDRESS  | V JUNGEBERG, THOM 175 MANSFIELD AVE SHELBY OH V ADKINS, GREGORY 175 MANSFIELD AVE SHELBY OH V  | AS D.                 |                                 | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4.1 TITLE   | JCC / III Idon   | ☐ Change ☐ Addition   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  | V<br>JUNGEBERG, THOM<br>175 MANSFIELD AVE<br>SHELBY OH<br>V<br>ADKINS, GREGORY<br>175 MANSFIELD AVE<br>SHELBY OH   | AS D.                 | ] DELETE                        | 2. 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP 3. 1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP   | JCC / II Idon  | Change Addition   |
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| TITLE  NAME  STREET ADDRESS  CITY - ST- ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST- ZIP  TITLE  VAME  STREET ADDRESS  CITY - ST- ZIP  TITLE  VAME  STREET ADDRESS  CITY - ST- ZIP  TITLE  | V JUNGEBERG, THOM 175 MANSFIELD AVE SHELBY OH V ADKINS, GREGORY 175 MANSFIELD AVE SHELBY OH V ALBERT, TODD E 175 MANSFIELD AV SHELBY OH V  | AS D. [<br>S          | ] DELETE                        | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE   | JCC / III lack)  | Change Addition   |
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| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  IAME  | V JUNGEBERG, THOM 175 MANSFIELD AVE SHELBY OH V ADKINS, GREGORY: 175 MANSFIELD AVE SHELBY OH V ALBERT, TODD E 175 MANSFIELD AV SHELBY OH V FREUND, AMEDEE 175 MANSFIELD AVE SHELBY OH V KIRKNER, ARTHUR P                            | AS D.  S  E           | DELETE  DELETE                  | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME  | JCC / III (acr)  | Change Addition  Change Addition  Change Addition  Change Addition                  |
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SIGNATURE: Michael A. Brogan 4/16/96 419-342-8443

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## THE SHELBY INSURANCE COMPANY

| Sr.V    | Gregory S. Adkins   | 175 Mansfield Avenue, Shelby, OH 44875         |
|---------|---------------------|--|
| v       | Todd E. Albert      | 175 Mansfield Avenue, Shelby, OH 44875         |
| v       | Michael A. Brogan   | 175 Mansfield Avenue, Shelby, OH 44875         |
| v       | Gary A. Christy     | 175 Mansfield Avenue, Shelby, OH 44875         |
| CIO     | Michael C. Koetters | 120 Monument Circle, Indianapolis, IN 46204    |
| T       | George D. Martin    | 120 Monument Circle, Indianapolis, IN 46204    |
| Asst.S  | Kimberly J. Miller  | 120 Monument Circle, Indianapolis, IN 46204    |
| S       | Nancy L. Purcell    | 120 Monument Circle, Indianapolis, IN 46204    |
| Sr.V    | Thomas J. Rowley    | 175 Mansfield Avenue, Shelby, OH 44875         |
| v       | Thomas E. Schadler  | 175 Mansfield Avenue, Shelby, OH 44875         |
| v/cfo   | Donald J. Stoner    | 175 Mansfield Avenue, Shelby, OH 44875         |
| Sr.V    | Steven D. Tufts     | 175 Mansfield Avenue, Shelby, OH 44875         |
| P/CEO/D | J. John Wortman     | 175 Mansfield Avenue, Shelby, OH 44875         |
| D       | Michael G. Ansay    | 1329 W. Grand Ave., Port Washington, WI 53074  |
| D       | Thomas E. Hoaglin   | 100 East Broad Street, Columbus, OH 43271-0261 |
| D       | J. Darrell Kelley   | 555 Lake Border Drive., Apopka, FL 32703       |
| D       | L. Ben Lytle        | 120 Monument Circle, Indianapolis, IN 46204    |
| D       | Scott G. Neill      | 100 N. Tryon Street, Charlotte, NC 28255       |
| D       | Roger Noall         | 127 Public Square, Cleveland, OH 44114-1306    |
| D       | Patrick M. Sheridan | 120 Monument Circle, Indianapolis, IN 46204    |
| D       | J. Raphael Topper   | 1707 Marietta Road, Lancaster, OH 43130        |