FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 8:14

DOCUMENT # P15595 (2)

1. Corporation Name
INTERCARGO INSURANCE COMPANY

Principal Place of Business	Mailing Address
1450 E AMERICAN LANE 20TH FLOOR SCHAUMBURG IL 60173 US	1450 E AMERICAN LANE 20TH FLOOR SCHAUMBURG IL 60173 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/14/1987
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) (29) Country (25) (30)

4. FEI Number: 85-0277191 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FLORIDA INSURANCE COMMISSIONER
THE CAPITOL BUILDING
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City FL 85 Zip Code

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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	ZUHLKE, JAMES R.	12 NAME		
STREET ADDRESS	1450 E AMERICAN LANE, 20TH FLR	13 STREET ADDRESS		
CITY-ST-ZIP	SCHAUMBURG IL	14 CITY-ST-ZIP		
TITLE	CST	21 TITLE		☒ Change ☐ Addition
NAME	GOEEKING, LAWRENCE P	22 NAME	Goecking, Lawrence P	
STREET ADDRESS	1450 E AMERICAN LANE, 20TH FLOOR	23 STREET ADDRESS		
CITY-ST-ZIP	SCHAUMBURG IL	24 CITY-ST-ZIP		
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	LITMAN, ARTHUR	32 NAME		
STREET ADDRESS	5240 W. 104TH ST.	33 STREET ADDRESS		
CITY-ST-ZIP	LOS ANGELES CA	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	FRITZ, ARTHUR J.	42 NAME		
STREET ADDRESS	735 MARKET ST.	43 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA	44 CITY-ST-ZIP		
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	ROBINSON, JOHN H.	52 NAME		
STREET ADDRESS	260 TOWNSEND STREET	53 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA	54 CITY-ST-ZIP		
TITLE	D	61 TITLE		☐ Change ☐ Addition
NAME	BODENSTEIN, KENNETH A.	62 NAME		
STREET ADDRESS	2029 CENTURY PRK E. #860	63 STREET ADDRESS		
CITY-ST-ZIP	LOS ANGELES CA	64 CITY-ST-ZIP		

14. I do 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)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James R. Zuhlke 1/25/95 (708) 517-2990
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone #

0449508 FP

P15595

INTERCARGO
INSURANCE COMPANY

April 4, 1995

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

INTERCARGO INSURANCE COMPANY

Dear Sir or Madam:

Enclosed please find check #8726 in the amount of $200.00 for payment of the enclosed 1995 Corporation Annual Report.

In order to accurately record what we have submitted, we ask that you acknowledge our submission by returning this letter, signed and dated. We have enclosed a self-addressed, stamped envelope for your convenience.

Please contact myself or Ms. Gloria Nelson at (708) 517-2510 should any additional information be required.

Sincerely,

Donna Vlasaty

Donna Vlasaty
Staff Accountant

Received By

(Company Name/Department)

Print Name and Title

Date Received

1450 East American Lane, 20th Floor, Schaumburg, Illinois 60173
Telephone 708/517-2510 Toll Free 1-800/394-3909 Fax 708/517-2996

Please sign and return this letter.
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INTERCARGO
INSURANCE COMPANY

April 4, 1995

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

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