

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P17246** (0)
1. Corporation Name
PROPERTY-CASUALTY COMPANY OF MCA



Principal Place of Business 1700 GALLOPING HILL ROAD 2ND FLOOR KENILWORTH NJ 07033 US	Mailing Address 1700 GALLOPING HILL ROAD -- 2ND FLOOR KENILWORTH NJ 07033 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 525 Boulevard Suite, Apt. #, etc.		2a. Mailing Address 26 525 Boulevard Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/16/1987	
22 City & State Kenilworth, NJ		27 City & State Kenilworth, N.J.		4. FEI Number 22-3208647 Applied For <input type="checkbox"/> Not Applicable	
23 Zip 07033		28 Country Union		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 07033		25 Union		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
29 07033		30 Union		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER
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
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  **William Clark** 2/28/98
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANIER, JERRY L	1.2 NAME	
STREET ADDRESS	1700 GALLOPING HILL ROAD, 2ND FLOOR	1.3 STREET ADDRESS	525 Boulevard
CITY-ST-ZIP	KENILWORTH NJ 07033	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, WILLIAM J.	2.2 NAME	
STREET ADDRESS	1700 GALLOPING HILL ROAD, 2ND FLOOR	2.3 STREET ADDRESS	525 Boulevard
CITY-ST-ZIP	KENILWORTH NJ 07033	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREELEY, DORIS	3.2 NAME	
STREET ADDRESS	1700 GALLOPING HILL ROAD, 2ND FLOOR	3.3 STREET ADDRESS	525 Boulevard
CITY-ST-ZIP	KENILWORTH NJ 07033	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 

CR2E034 (10/97)