


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90193 050 ***150.00

DOCUMENT # P18964	
1. Entity Name OHIO INDEMNITY COMPANY	

Principal Place of Business 250 E. BROAD STREET TENTH FLOOR COLUMBUS, OH 43215	Mailing Address 250 E. BROAD STREET TENTH FLOOR COLUMBUS, OH 43215
--	--

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



05012006 Chg-P CR2E034 (11/05)

4. FEI Number 31-0620146	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent	
CT CORPORATION 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	

7. Name and Address of New Registered Agent	
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
-----------------	--	------------

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
---	---	------------------------------------	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOKOL, SIMON 250 E. BROAD STREET - 10TH FLOOR COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Saul Sokol, D <input type="checkbox"/> Change <input type="checkbox"/> Addition 250 E Broad St. 10th Fl Columbus, Ohio 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP STEPHAN, DANIEL J 250 E. BROAD STREET - 10TH FLOOR COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kent Bowen, D <input type="checkbox"/> Change <input type="checkbox"/> Addition 250 E Broad St, 10th Fl Columbus, Ohio 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO NOLAN, MATT 250 E. BROAD STREET - 10TH FLOOR COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Doug Borrer, D <input type="checkbox"/> Change <input type="checkbox"/> Addition 250 E. Broad St, 10th Fl Columbus, Ohio 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOKOL, JOHN S 250 E. BROAD STREET - 10TH FLOOR COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Daniel Harkins, D <input type="checkbox"/> Change <input type="checkbox"/> Addition 250 E. Broad St, 10th Fl Columbus, Ohio 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TOTH, STEPHEN J 250 E. BROAD STREET - 10TH FLOOR COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	William Sheley, D <input type="checkbox"/> Change <input type="checkbox"/> Addition 250 E. Broad St. 10th Fl. Columbus, Ohio 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALTER, MATTHEW 250 E. BROAD STREET - 10TH FLOOR COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: 	JOHN SOKOL	Date 5/1/06	Daytime Phone # 614-228-2800
--	-------------------	--------------------	-------------------------------------