


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90045 020 ***150.00

DOCUMENT # P26212					
1. Entity Name FOREMOST PROPERTY AND CASUALTY INSURANCE COMPANY					
Principal Place of Business 5600 BEECH TREE LANE GRAND RAPIDS, MI 49316 US			Mailing Address 5600 BEECH TREE LANE P.O. BOX 2450 GRAND RAPIDS, MI 49501		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 35-1604635	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOSHOVEN, STEPHEN J 5600 BEECH TREE LANE CALEDONIA, MI 49316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Johnson, John E 5600 Beech Tree Lane Caledonia, MI 49316 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV/D HANNIGAN, JOHN J 5600 BEECH TREE LANE CALEDONIA, MI 49316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Treul, Nancy H 5600 Beech Tree Lane Caledonia, MI 49316 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOP WOUDSTRA, F. ROBERT 5600 BEECH TREE LANE CALEDONIA, MI 49316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Woudstra, F Robert 5600 Beech Tree Lane Caledonia, MI 49316 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSGC BROWN, MARTIN R 5600 BEECH TREE LANE CALEDONIA, MI 49316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Troutman, Edward L 5600 Beech Tree Lane Caledonia, MI 49316 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PEPPER, JEFFREY L 5600 BEECH TREE LANE CALEDONIA, MI 49316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AT Wauthier, Pierre C 4680 Wilshire Blvd Los Angeles CA 90010 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MOUNTZ, HUBERT L 4680 WILSHIRE BLVD LOS ANGELES, CA 90010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Feinstein, Martin D 4680 Wilshire Blvd Los Angeles CA 90010 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
12. 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 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: <u>Jeffrey L Pepper</u> Jeffrey L Pepper, Treasurer 3-10-04 (616) 956-3750 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

54019931



03082004 Chg-P CR2E034 (10/03)

Attachment

54019931

Foremost Property & Casualty Insurance Company
Additional Officers & Directors

P26212

<u>Title</u>	<u>Name</u>	<u>Street Address</u>	<u>City, State</u>
V	Katz, Jason L	4680 Wilshire Blvd	Los Angeles, CA
V	Mc Lane, Cynthia A	5600 Beech Tree Lane	Caledonia, MI
V	Pessetti, Michael J	5600 Beech Tree Lane	Caledonia, MI
AVP	Kelly, David J	5600 Beech Tree Lane	Caledonia, MI
AS	Hohl, Doren E	4680 Wilshire Blvd	Los Angeles, CA
AVP	Mc Daniel, Lynn	5600 Beech Tree Lane	Caledonia, MI
AT	Myhan, Ronald G	4680 Wilshire Blvd	Los Angeles, CA
V/D	Smith, Stanley R	4680 Wilshire Blvd	Los Angeles, CA