

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90358 044 ***150.00

DOCUMENT # P27974

1. Entity Name
AMERICAN FUJI FIRE AND MARINE INSURANCE COMPANY

Principal Place of Business

**1 KEMPER DR
 LONG GROVE IL 60049
 US**

Mailing Address

**1 KEMPER DR
 LONG GROVE IL 60049
 US**

2. Principal Place of Business

3. Mailing Address

c/o Reinsurance Solutions Int'l

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Two Logan Square-21st Floor

City & State

City & State

Philadelphia, PA 19103

4. FEI Number

36-3155373

Applied For

Not Applicable

Zip

Country

Zip

Country

19103

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**INSURANCE COMMISSIONER
 CAPITOL BLDG.
 TALLAHASSEE FL 32301**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
 NAME ~~TAKEISHI, TSUDA~~
 STREET ADDRESS **1 KEMPER DRIVE**
 CITY-ST-ZIP **LONG GROVE IL 60049**

TITLE **P** ☐ Change ☐ Addition
 NAME **TANAKA, TADAO**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** ☐ Delete
 NAME **SMITH, D. R**
 STREET ADDRESS **1 KEMPER DR.**
 CITY-ST-ZIP **LONG GROVE IL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **CONLIN, DEAN R**
 STREET ADDRESS **1 KEMPER DR.**
 CITY-ST-ZIP **LONG GROVE IL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☐ Delete
 NAME **PAPASTEFAN, W. S**
 STREET ADDRESS **1 KEMPER DR.**
 CITY-ST-ZIP **LONG GROVE IL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **EVP** ☐ Delete
 NAME **HORIKOSHI, KOHEI** **KOHEI**
 STREET ADDRESS **1 KEMPER DRIVE**
 CITY-ST-ZIP **LONG GROVE IL 60049**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED **Papastefan**

4/29/02

847.320.5131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)



April 30, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Enclosed are the 2002 Uniform Business Report and a check in the amount of \$150.00 for the American Fuji Fire and Marine Insurance Company. Please update your records as the Company's mailing address has changed. It is now as follows:

American Fuji Fire and Marine Insurance Company
C/o Reinsurance Solutions International, LLC
Two Logan Square – 21st Floor
Philadelphia, PA 19103

If you have any questions or comments, please contact me at the address above, or call me at 267.675.3323.

Yours truly,

Donald M. Fritchman
Senior Statutory Accountant
Reinsurance Solutions International, LLC
On behalf of American Fuji Fire and Marine Insurance Company
Two Logan Square – 21st Floor
Philadelphia, PA 19103

E-mail: Donald.Fritchman@rsi-solutions.com
Fax: 267.675.3373 or 267.675.3340
Phone: 267.675.3323