2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33145

Entity Name: REGENT INSURANCE COMPANY

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE GENERAL DRIVE SUN PRAIRIE, WI 53596 **Current Mailing Address: New Mailing Address:** ONE GENERAL DRIVE SUN PRAIRIE, WI 53596 FEI Number: 39-6062860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MCPARTLAND, PETER G Name: Name: CHRISTEN, PETER ONE GENERAL DR 15805 NE 24TH STREET Address: Address: City-St-Zip: SUN PRAIRIE, WI 53596 City-St-Zip: BELLEVUE, WA 98008 US Title: DTVP Title: () Delete (X) Change () Addition SCHANEN, JOHN ROGER Name: Name: SCHANEN, JOHN R ONE GENERAL DRIVE ONE GENERAL DRIVE Address: Address: SUN PRAIRIE, WI 53596 SUN PRAIRIE, WI 53596 US City-St-Zip: City-St-Zip: () Delete (X) Change () Addition Title: Title: KALINA, RICHARD B BONDURA, JOHN M Name: Name: ONE GENERAL DRIVE ONE GENERAL DRIVE Address: Address: City-St-Zip: SUN PRAIRIE, WI 53596 City-St-Zip: SUN PRAIRIE, WI 53596 US Title: () Delete Title: DVP () Change (X) Addition DEHN, JEFFREY R Name: Name: Address: Address: 15805 NE 24TH STREET City-St-Zip: City-St-Zip: BELLEVUE, WA 98008 US Title: Title: () Change (X) Addition () Delete VERNON, JENNIFER J Name: Name: Address: ONE GENERAL DRIVE Address: SUN PRAIRIE, WI 53596 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition BURTNETT, JODIE L Name: Name: ONE GENERAL DRIVE Address: Address: City-St-Zip: City-St-Zip: SUN PRAIRIE, WI 53596 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JODIE L. BURTNETT AS 04/13/2009