FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

₽PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name P33353 (4)

FIREM/	an's fund insurance c	OMPANY OF NEBRA	SKA						
Principal Place of	of Business	Mailing Address				-			i 01811 81811 (881
11516 MIRACLE HILLS DRIVE OMAHA NE 68154		777 SAN MARIN DRIVE CORP. SECRETARY'S OFFICE NOVATO CA 94998							
		US OF S4350				3. Date Incorporated or Qualified 03/26/1991	1	of Last Re)4/19/19	-
2. Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number	<u> </u>		Applied For
21		26			71-0526209 Not Applicable			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27							Required
City & State		City & State				6. Election Campaign Financing			May Be
Zin Country		Zip Country				Trust Fund Contribution 8. This corporation has liability for it	otoooible t		d to Fees
Zip 24	Country Zip C		h	umy			ntangibie te £d tNo	in union a	130.002,
g. Name and Address of Curre				T		10. Name and Address of New Registered Agent			
				81	Name				
INSURA	NCE COMMISSIONER			82	Street Addre	ss (P.O. Box Number is Not Acceptab	le)		
	L BUILDING				011001710010				
TALLAH	ASSEE FL			83					
•				84	City		FI	85 Zig	ρ 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									
	Signature, typed or printed hame of registered agent OFFICERS AN		118 Registere		signature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICEDS AND) DIRECTO	YRS INI 12
12. TITLE	PCEO OFFICERS AN	DELETE		1. 1 TITLE		ADDITIONS/OF ANGES TO OFF		□ Change	Addition
NAME	STINNETTE, JOE L. J			NAME					
STREET ADDRESS	A411 144 BB1 BB			1,3 STREET ADDRESS					
CITY-S1-ZIP	NOVATO CA			1.4 CITY-S1-7IP					
TITLE	SVP	DELETE	2 1	TILE				☐ Change	Addition
NAME	SWANSON, THOMAS A		221	NAME					
STREET ADDRESS	777 SAN MARIN DRIVE		2.3	2.3 STREET ADDRESS					
DITY-ST-ZIP			24	24 CITY - ST - ZIP					
TITLE	AS	DELETE	3 1	TITLE			ļ	☐ Change	☐ Addition
NAME	JANET M. HOLLAND			NAME		5000018	127	יחי=	
STREET ADDRESS	777 SAN MARIN DR			3 3. STREET ADORESS		-05/08/9601	a ε Λ16Ω	116	
CITY-ST-ZIP	NOVATO CA 94998	F1 DELETE		CITY-S	T-ZIP	***200.00		☐ Change	Addition
TITLE	D DARWE BLACK	DELETE		TITLE		250.00		Change	[_] Addition
NAME	GARY E. BLACK, 777 SAN MARIN DR			4.2 NAME 4.3 STREET ADDR					
STREET ADDRESS	NOVATO CA			4.4 CHY-ST-ZIP					
CITY-ST-ZIP TITLE	DC	T DELETE		5. 1 TITLE				Change	Addition
NAME	HANSMEYER, HERBERT F.	<u></u>		5.2 NAME					
STREET ADDRESS	777 SAN MARIN DR				ADORESS				
CITY-ST-ZIP	NOVATO CA			CITY-S	1				
TITLE	D	Æ ∂ELE1E		TITLE		D/CFO		☐ Change	K Addition
NAME	John F. Meyer		6.2	NAME		Jeffrey H. Post			101
STREET ADDRESS	777 SAN MARIN DR.		63	STREET	ADDRESS	777 San Marin Drive)		ノノイタ
CITY-ST-ZIP	NOVATO CA			CITY-S		Novato CA 94998			
14 Ldo hereb	v certify that the information supplied	with this filing is voluntarily fur	nished and	d doe	s not qualify for	or the exemption stated in Section 119	.07(3)(k), F	Iorida Statu	ites 1 further

roo nurepy certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, Marther 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 many under oath; that I am an officer or director of the corporation or the receiver or trustee engrowered to execute this report as required by Chapter 607, Florida Statutes; and that rhy name appears in Block 12 or Block 13 if changed, or on an attachment with an address?

SIGNATURE: (

4/26/96

(415) 899-3621

Date

Daytinie Phone #

CR2E034 (12/95)

FIREMAN'S FUND INSURANCE COMPANY OF NEBRASKA (formerly Fireman's Fund Insurance Company of Iowa) (Subsidiary of Fireman's Fund Insurance Company)

PURPOSE: To engage in Property/Liability insurance business.

DIRECTORS

Gary E. Black Herbert F. Hansmeyer David R. Pollard Jeffrey H. Post Joe L. Stinnette, Jr. Edmund O. Wall *

ELECTED OFFICERS

Herbert F. Hansmeyer Joe L. Stinnette, Jr.

David R. Pollard Jeffrey H. Post

Harold N. Marsh, III

Thomas A. Swanson

Edmund O. Wall

Richard G. Warren

Chairman of the Board
President and
Chief Executive Officer
Executive Vice President
Executive Vice President, Chief
Financial Officer and Actuary
Senior Vice President and
Treasurer
Senior Vice President, General
Counsel and Corporate Secretary
Senior Vice President and
Chief Administrative Officer
Senior Vice President and
Controller

APPOINTED OFFICERS

Janet M. Holland

Assistant Secretary

Business address: All of the above are located at 777 San Marin Drive, Novato, California 94998, except where noted.

* Home office address: 11516 Miracle Hills Drive Omaha, NE 68154