2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State 05-01-2006 90358 034 ***150.00 DOCUMENT # P94000060387 1. Entity Name PROGRESSIVE AUTO PRO INSURANCE COMPANY 40073641 Principal Place of Business Mailing Address 4030 CRESCENT PARK DR. 6300 WILSON MILLS RD BUILDING B W-33 MAYFIELD VILLAGE, OH 44143-2182 RIVERVIEW, FL 33569 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242006 Chg-P CR2E034 (11/05) City & State 4. FEI Number City & State Applied For 59-3213815 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHIEF FINANCIAL OFFICER Street Address (P.O. Box Number is Not Acceptable) P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 City 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 \$5.00 May Be After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE Change Addition NAME MARSHALL, MARIANN W. NAME STREET ADDRESS 6300 WILSON MILLS ROAD STREET ADDRESS CITY-ST-ZIP MAYFIELD VILLAGE, OH 44143 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition ANDREANO, MARY B NAME STREET ADDRESS 6300 WILSON MILLS RD. STREET ADDRESS CITY-ST-ZIP MAYFIELD VILLAGE, OH 44143 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition ZIEGLER, SCOTT W. NAME NAME STREET ADDRESS 200 WESTGATE PARKWAY- SUITE 300 STREET ADDRESS CITY-ST-ZIP RICHMOND, VA 23233 CITY-ST-ZIP TITLE VPD TITLE Delete Secretary ☐ Change ■Addition PRATT, DAVID L NAME Michael R. Uth STREET ADDRESS 300 N COMMONS BLVD. 6300 Wilson Mills Rd.] STREET ADDRESS CITY-ST-ZIP MAYFIELD VILLAGE, OH 44143 CITY-ST-ZIP Mayfield Village, OH 44143 TITLE AT ☐ Delete TITLE ☐ Change ☐ Addition COLEMAN, SCOTT E NAME NAME STREET ADDRESS 6300 WILSON MILLS RD STREET ADDRESS CITY-ST-ZIP MAYFIELD VILLAGE, OH 44143 CITY-ST-ZIP TITLE AS Delete

FILED

May 01, 2006 8:00 am

Change

☐ Addition

12. I hereby certify that the information supplied with this filling 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

6300 Wilson Mills Rd.

Mayfield Village, OH

Marjann W. Marshall 4124106 SIGNATURE: (

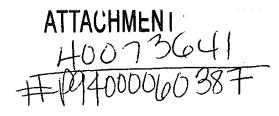
KOSUDA, KAREN

300 N. COMMONS BLVD

MAYFIELD VILLAGE, OH 44143

NAME

STREET ADDRESS





Issue Date: 04/12/2006

Draft Number: 601250276

Page: 1

Vendor Name: STATE OF FLORIDA

Inv. Date	Invoice Number	P.O. Number	Gross Amount	Disc Amount	Net Amount
03/31/2006	15000 402 006 CO 40 20 06 FOR PROFIT 40 Progressive Auto	· · · · · · · · · · · · · · · · · ·		0.00	150.00