

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 018193 (3)

1. Corporation Name  
**STATE MUTUAL INSURANCE COMPANY**



Principal Place of Business: ONE STATE MUTUAL DRIVE, P.O. BOX 153, ROME GA 30162-7153  
Mailing Address: ONE STATE MUTUAL DRIVE, P.O. BOX 153, ROME GA 30162-7153

3. Date Incorporated or Qualified: 03/26/1936  
3a. Date of Last Report: 03/10/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

4. FEI Number: 58-1449898  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes [ ] No [ ]

9. Name and Address of Current Registered Agent: BOOHER, BOYD, 930 N. TEXAS AVENUE, ORLANDO FL 32804  
10. Name and Address of New Registered Agent: James O. Shelfer, 1300 Thomaswood Drive, Tallahassee FL 32312, FL 85 Zip Code 32303

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: James O. Shelfer

4/24/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <input checked="" type="checkbox"/> DELETE	1.1 TITLE: P	1.2 NAME: Yancey, Delos, III	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: STRAUSS, ROBERT J	1.3 STREET ADDRESS: 28 MARGO TRAIL SE	1.4 CITY-STATE-ZIP: ROME, GA 00000	
STREET ADDRESS: ROME, GA 00000	2.1 TITLE: Sr. VP	2.2 NAME: Altus Ben Forrester	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-STATE-ZIP: ROME, GA 00000	2.3 STREET ADDRESS: 1 Richland Ct	2.4 CITY-STATE-ZIP: ROME, GA 30161	
TITLE: S	3.1 TITLE: Sr. VP	3.2 NAME: Robert Gregory Morrow	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: ROGERS, ANN	3.3 STREET ADDRESS: 347 Mt Alto Rd	3.4 CITY-STATE-ZIP: ROME, GA 30162	
STREET ADDRESS: 1328 ABRAMS RD SE	4.1 TITLE: CHM	4.2 NAME: Yancey, Delos H.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-STATE-ZIP: SILVER CREEK GA	4.3 STREET ADDRESS: 809 Horseleg Creek Rd	4.4 CITY-STATE-ZIP: ROME, GA 30162	
TITLE: CDP	5.1 TITLE: Rick A. Gordon, Sr. V.P.,	5.2 NAME: 511 Waterford Drive	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: YANCEY, DELOS H	5.3 STREET ADDRESS: Cartersville, GA 301206443	5.4 CITY-STATE-ZIP: ROME, GA 30162	
STREET ADDRESS: 809 HORSELEG CREEK RD	6.1 TITLE: 10000183168	6.2 NAME: -05/21/96-01041-007	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-STATE-ZIP: ROME, GA 00000	6.3 STREET ADDRESS: ***200.00	6.4 CITY-STATE-ZIP: ROME, GA 30162	
TITLE: <input type="checkbox"/> DELETE			
NAME: <input type="checkbox"/> DELETE			
STREET ADDRESS: <input type="checkbox"/> DELETE			
CITY-STATE-ZIP: <input type="checkbox"/> DELETE			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rick A. Gordon, Sr. V.P., Date: 4-2-96, Division File #: 1 8002417598

CR2E034 (12/95)