

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001372

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: ASSOCIATION CASUALTY INSURANCE COMPANY

## Current Principal Place of Business:

3420 EXE. CTR DR  
STE 200  
AUSTIN, TX 78731

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 9728  
AUSTIN, TX 78766

## New Mailing Address:

P.O. BOX 618  
COLUMBIA, MO 65205

FEI Number: 74-1958653

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER  
P.O. BOX 6200 32314-6200  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 US

## Name and Address of New Registered Agent:

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:

Title: CDP ( ) Delete  
Name: WAGNER, ROBERT J  
Address: 1907 KINGSBRIDGE DRIVE  
City-St-Zip: COLUMBIA, MO 65203

Title: DVS ( ) Delete  
Name: THOMPSON, GARY W  
Address: 3903 KEYSTONE COURT  
City-St-Zip: COLUMBIA, MO 65203

Title: DVT ( ) Delete  
Name: BALLARD, ROGER D  
Address: 8280 NORTH MILLSITE  
City-St-Zip: COLUMBIA, MO 65201

Title: DV ( ) Delete  
Name: BIRDSOONG, ROGER D  
Address: 4808 GREENBERRY COURT  
City-St-Zip: COLUMBIA, MO 65203

Title: DV ( ) Delete  
Name: GALLOWAY, BEN A  
Address: 501 SOUTH GLENWOOD AVE  
City-St-Zip: COLUMBIA, MO 65203

Title: V ( ) Delete  
Name: BEERMAN, JAMES R  
Address: 5435 SOUTH 124 STREET  
City-St-Zip: OMAHA, NE 68137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP (X) Change ( ) Addition  
Name: WAGNER, ROBERT J  
Address: 1907 KINGSBRIDGE ROAD  
City-St-Zip: COLUMBIA, MO 65203

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV (X) Change ( ) Addition  
Name: GALLOWAY, BEN  
Address: 802 SUNSTONE LANE  
City-St-Zip: COLUMBIA, MO 65201

Title: DV (X) Change ( ) Addition  
Name: MORRIS, DIANNE R  
Address: 37 WATERFALL DRIVE  
City-St-Zip: AUSTIN, TX 78738

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: ROBERT J. WAGNER

MR

03/31/2009

Electronic Signature of Signing Officer or Director

Date