

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

| | | | | | | | |
|---|--------------|--|---------------------------------------|---|--------------|---------------------|--|
| 1. Corporate ID No. 70511 | | 2. Name of Corporation DAIMLERCHRYSLER INSURANCE AGENCY, INC. | | | | | |
| 3. Street Address Principal Business Office 1000 CHRYSLER DRIVE, CIMS:485-12-30 | | | | City AUBURN HILLS | State MI | Zip 48326-2766 | |
| 4. Business Phone No. 248 512-3385 | | | 5. State of Incorporation MICHIGAN | | | 6. SIC Code 5702 | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island INSURANCE | | | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | | | |
| President Name J. S. HAAN | | | | Vice President Name V. CONDON | | | |
| Street Address 27777 INKSTER ROAD | | | | Street Address 27777 INKSTER ROAD | | | |
| City FARMINGTON HILLS | State MI | Zip 48334 | | City FARMINGTON HILLS | State MI | Zip 48334 | |
| Secretary Name T. L. HACKMAN | | | | Treasurer Name J. S. HAAN | | | |
| Street Address 27777 INKSTER ROAD | | | | Street Address 27777 INKSTER ROAD | | | |
| City FARMINGTON HILLS | State MI | Zip 48334 | | City FARMINGTON HILLS | State MI | Zip 48334 | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | | | |
| Director Name J. S. HAAN | | | | Director Name P. E. KNAUSS | | | |
| Street Address 27777 INKSTER ROAD | | | | Street Address 27777 INKSTER ROAD | | | |
| City FARMINGTON HILLS | State MI | Zip 48334 | | City FARMINGTON HILLS | State MI | Zip 48334 | |
| Director Name NONE | | | | Director Name NONE | | | |
| Street Address | | | | Street Address | | | |
| City | State | Zip | | City | State | Zip | |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | |
| AUTHORIZED SHARES | | | | ISSUED SHARES | | | |
| Number of Shares | Class/Series | Par Value | | Number of Shares | Class/Series | Par Value | |
| 100 | COMMON | NO PAR | | 100 | COMMON | NO PAR | |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date **FILED**
Check No. **MAY 16 2005**
By CRS
FOR SECRETARY OF STATE USE ONLY

Steven C. Poling, Ass't. Secretary 05/11/2005

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

R. J. Vanderbeek 2/ /2005
Signature of Officer Date

R. J. VANDERBEEK
Print or Type Name of Officer
ASSISTANT CONTROLLER
Title of Officer

DAIMLERCHRYSLER INSURANCE AGENCY, INC.

OFFICERS/DIRECTORS

| | | |
|------------------|--------------------------------|--|
| J. S. Haan | President, Treasurer, Director | 27777 Inkster Road Farmington Hills, MI 48334 |
| V. Condon | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| A. Ohmstedt | Vice President, Director | 27777 Inkster Road Farmington Hills, MI 48334 |
| T. L. Hackman | Secretary, Chief Legal Officer | 27777 Inkster Road Farmington Hills, MI 48334 |
| R. J. Vanderbeek | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| R. A. Maier | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| S. E. Roegner | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| P. H. Latham | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| S. C. Poling | Assistant Secretary | 27777 Inkster Road Farmington Hills, MI 48334 |
| P. E. Knauss | Director | 27777 Inkster Road Farmington Hills, MI 48334 |

SECRET
05 FEB 25 PM 3:47

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

| | | | | | |
|---|--------------|--|--|--------------|---------------------|
| 1. Corporate ID No. 70511 | | 2. Name of Corporation DAIMLERCHRYSLER INSURANCE AGENCY, INC. | | | |
| 3. Street Address Principal Business Office 1000 CHRYSLER DRIVE, CIMS: 485-12-30 | | | City AUBURN HILLS | State MI | Zip 48326-2766 |
| 4. Business Phone No. 248 512-3385 | | 5. State of Incorporation MICHIGAN | | | 6. SIC Code 5702 |
| 7. Brief Description of the Character of Business Conducted in Rhode Island INSURANCE | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| President Name J. S. HAAN | | | Vice President Name W. E. HARRIS | | |
| Street Address 27777 INKSTER ROAD | | | Street Address 27777 INKSTER ROAD | | |
| City FARMINGTON HILLS | State MI | Zip 48334 | City FARMINGTON HILLS | State MI | Zip 48334 |
| Secretary Name T. L. HACKMAN | | | Treasurer Name J. S. HAAN | | |
| Street Address 27777 INKSTER ROAD | | | Street Address 27777 INKSTER ROAD | | |
| City FARMINGTON HILLS | State MI | Zip 48334 | City FARMINGTON HILLS | State MI | Zip 48334 |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | | | |
| Director Name J. S. HAAN | | | Director Name D. H. OLSEN | | |
| Street Address 27777 INKSTER ROAD | | | Street Address 27777 INKSTER ROAD | | |
| City FARMINGTON HILLS | State MI | Zip 48334 | City FARMINGTON HILLS | State MI | Zip 48334 |
| Director Name T. C. MCALEAR | | | Director Name NONE | | |
| Street Address 27777 INKSTER ROAD | | | Street Address | | |
| City FARMINGTON HILLS | State MI | Zip 48334 | City | State | Zip |
| 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES | | | 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES | | |
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 100 | COMMON | NO PAR | 100 | COMMON | NO PAR |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date 2-25-04
Check No. 6500397
By: HP
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

R. J. Vanderbeek 2/23/04
Signature of Officer Date
R. J. VANDERBEEK
Print or Type Name of Officer
ASSISTANT CONTROLLER
Title of Officer

DAIMLERCHRYSLER INSURANCE AGENCY, INC.

OFFICERS/DIRECTORS

| | | |
|------------------|--------------------------------|--|
| J. S. Haan | President, Treasurer, Director | 27777 Inkster Road Farmington Hills, MI 48334 |
| W. E. Harris | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| D. A. Pecoraro | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| R. L. Taylor | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| T. L. Hackman | Secretary, Chief Legal Officer | 27777 Inkster Road Farmington Hills, MI 48334 |
| R. J. Vanderbeek | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| R. A. Maier | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| S. E. Roegner | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| P. H. Latham | Assistant Treasurer | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| S. C. Poling | Assistant Secretary | 27777 Inkster Road Farmington Hills, MI 48334 |
| D. H. Olsen | Director | 27777 Inkster Road Farmington Hills, MI 48334 |
| T. C. McAlear | Director | 27777 Inkster Road Farmington Hills, MI 48334 |



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **70511** 2. Name of Corporation **DaimlerChrysler Insurance Agency, Inc.**
3. Street Address Principal Business Office **27777 Inkster Rd.** City **Farmington Hills** State **MI** Zip **48334**
4. Business Phone No. **248 512-3071** 5. State of Incorporation **MICHIGAN** 6. SIC Code **5702**
7. Brief Description of the Character of Business Conducted in Rhode Island
Insurance

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|--|---|
| President Name J.S. Haan Street Address 27777 Inkster Rd City Farmington Hills State MI Zip 48334 | Vice President Name W.E. Harris Street Address 27777 Inkster Rd City Farmington Hills State MI Zip 48334 |
| Secretary Name T.L. Hackman Street Address same as above City same as above State MI Zip 48334 | Treasurer Name J.S. Haan Street Address same as above City same as above State MI Zip 48334 |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|--|--|
| Director Name J.S. Haan Street Address same as above City same as above State MI Zip 48334 | Director Name T.C. McAlear Street Address same as above City same as above State MI Zip 48334 |
| Director Name D.H. Olsen Street Address same as above City same as above State MI Zip 48334 | Director Name Street Address City State Zip |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | Number of Shares | Class/Series | Par Value |
|-------------------|------------------------------|--------------|-----------|
| | 100 COMM NO PAR VALUE | | |

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

| ISSUED SHARES | Number of Shares | Class/Series | Par Value |
|---------------|------------------|---------------|--------------|
| | 100 | Common | 10.00 |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 5 1 1 *

File Date: 2/25/03
Check No.: 0006289167
By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2/21/03
Signature of Officer Date
R.J. Vanderbeek
Print or Type Name of Officer

Assistant Controller
Title of Officer
5
Form 630 12/02

DAIMLERCHRYSLER INSURANCE AGENCY, INC.

OFFICERS/DIRECTORS

| | | |
|------------------|--------------------------------|--|
| J. S. Haan | President, Treasurer, Director | 27777 Inkster Road Farmington Hills, MI 48334 |
| W. E. Harris | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| D. A. Pecoraro | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| R. L. Taylor | Vice President | 27777 Inkster Road Farmington Hills, MI 48334 |
| T. L. Hackman | Secretary, Chief Legal Officer | 27777 Inkster Road Farmington Hills, MI 48334 |
| R. J. Vanderbeek | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| S. E. Roegner | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| P. H. Latham | Assistant Treasurer | 1000 Chrysler Drive Auburn Hills, MI 48326 |
| S. C. Poling | Assistant Secretary | 27777 Inkster Road Farmington Hills, MI 48334 |
| D. H. Olsen | Director | 27777 Inkster Road Farmington Hills, MI 48334 |
| T. C. McAlear | Director | 27777 Inkster Road Farmington Hills, MI 48334 |



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70511** 2. Name of Corporation **Pentastar insurance Agency, Inc.**

3. Street Address Principal Business Office **27777 Franklin Rd.** City **Southfield** State **MI** Zip **48034**
4. Business Phone No. **248.512.3071** 5. State of Incorporation **MICHIGAN** 6. SIC Code **5702**

7. Brief Description of the Character of Business Conducted in Rhode Island

Insurance

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|---|--|
| President Name J.S. Haan Street Address 27777 Franklin Rd. City Southfield State MI Zip 48034 | Vice President Name G.F. Betcher Street Address 27777 Franklin Rd. City Southfield State MI Zip 48034 |
| Secretary Name T.L. Hackman Street Address same as above City same as above State MI Zip 48034 | Treasurer Name J.S. Haan Street Address same as above City same as above State MI Zip 48034 |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|---|--|
| Director Name J.S. Haan Street Address same as above City same as above State MI Zip 48034 | Director Name G.F. Betcher Street Address same as above City same as above State MI Zip 48034 |
| Director Name P.E. Knauss Street Address same as above City same as above State MI Zip 48034 | Director Name Street Address City State Zip |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 COMM NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 COMMON 10.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 5 1 1 *

File Date: 3-1-02
Check No.: 6112 6060
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2/21/02
Signature of Officer Date

P.H. Latham
Ass't. Controller

PENSTASTAR INSURANCE AGENCY, INC.

OFFICERS

| <u>NAME</u> | <u>TITLE</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|-----------------------|--|
| J. S. Haan | President & Treasurer | 27777 Franklin Road Southfield, MI 48034 |
| G. F. Reicher | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| T. L. Hackman | Secretary | 27777 Franklin Road Southfield, MI 48034 |
| P. H. Latham | Assistant Controller | 1000 Chrysler Drive Auburn Hills, MI 48326-2766 |
| W. E. Harris | Vice President | 14 Sterling Street Wilkes Barre, PA 18702 |
| P. E. Knauss | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| B. C. Babbish | Assistant Secretary | 1000 Chrysler Drive Auburn Hills, MI 48326-2766 |
| R. A. Maier | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| D. A. Pecoraro | Vice President | 6025 S. Quebec Ste. 240 Englewood, CO 80111 |
| R. L. Taylor | Vice President | 27777 Franklin Road Southfield, MI 48034 |

1/10/2002

PENSTASTAR INSURANCE AGENCY, INC.

DIRECTORS

| <u>NAME</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|---|
| J. S. Haan | 27777 Franklin Road Southfield, MI 48034 |
| G. F. Reicher | 27777 Franklin Road Southfield, MI 48034 |
| P. E. Knauss | 27777 Franklin Road Southfield, MI 48034 |



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70511** 2. Name of Corporation **Pentastar Insurance Agency, Inc.**

3. Street Address Principal Business Office **27777 FRANKLIN RD** City **SOUTHFIELD** State **MI** Zip **48034**
4. Business Phone No. **248 512-3071** 5. State of Incorporation **MICHIGAN** 6. **5702c**

7. Brief Description of the Character of Business Conducted in Rhode Island

INSURANCE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **X** FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|--|--|
| President Name J.S. HAAN Street Address 27777 FRANKLIN RD City SOUTHFIELD State MI Zip 48034 | Vice President Name D.F. BROWNING Street Address 27777 FRANKLIN RD City SOUTHFIELD State MI Zip 48034 |
| Secretary Name T.L. HACKMAN Street Address 27777 FRANKLIN RD City SOUTHFIELD State MI Zip 48034 | Treasurer Name J.S. HAAN Street Address 27777 FRANKLIN RD City SOUTHFIELD State MI Zip 48034 |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|--|--|
| Director Name D.F. BROWNING Street Address 27777 FRANKLIN RD City SOUTHFIELD State MI Zip 48034 | Director Name J.S. HAAN Street Address 27777 FRANKLIN RD City SOUTHFIELD State MI Zip 48034 |
| Director Name G.F. REICHER Street Address 27777 FRANKLIN RD City SOUTHFIELD State MI Zip 48034 | Director Name NONE Street Address NONE City NONE State NONE Zip NONE |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | Number of Shares | Class/Series | Par Value |
|-------------------|------------------------------|--------------|-----------|
| | 100 COMM NO PAR VALUE | | |

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

| ISSUED SHARES | Number of Shares | Class/Series | Par Value |
|---------------|------------------|---------------|--------------|
| | 100 | COMMON | 10.00 |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 5 1 1 *

File Date: 2/16
Check No.: 879975
By: cu

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: [Signature] Date: 2/9/01
Print or Type Name of Officer: P.H. LATHAM
Title of Officer: ASSISTANT TREASURER



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70511** 2. Name of Corporation **Pentastar Insurance Agency, Inc.**
3. Street Address Principal Business Office **2777 FRANKLIN RD.** City **SOUTHFIELD** State **MICHIGAN** Zip **48034**
4. Business Phone No. **248-512-3088** 5. State of Incorporation **MICHIGAN** 6. SIC Code **5702**

7. Brief Description of the Character of Business Conducted in Rhode Island
INSURANCE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|---|---|
| President Name J. S. HAAN | Vice President Name D. F. BROWNING |
| Street Address 2777 FRANKLIN RD. | Street Address 2777 FRANKLIN RD. |
| City SOUTHFIELD State MICHIGAN Zip 48034 | City SOUTHFIELD State MICHIGAN Zip 48034 |
| Secretary Name T. L. HACKMAN | Treasurer Name J. S. HAAN |
| Street Address SAME AS ABOVE | Street Address SAME AS ABOVE |
| City _____ State _____ Zip _____ | City _____ State _____ Zip _____ |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS

| | |
|--|--|
| Director Name D. F. BROWNING | Director Name J. S. HAAN |
| Street Address SAME AS ABOVE | Street Address SAME AS ABOVE |
| City _____ State _____ Zip _____ | City _____ State _____ Zip _____ |
| Director Name G. F. REICHER | Director Name |
| Street Address SAME AS ABOVE | Street Address |
| City _____ State _____ Zip _____ | City _____ State _____ Zip _____ |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | | |
|-------------------|---------------|-----------|
| Number of Shares | Class/Series | Par Value |
| 100 | Common | |

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

| ISSUED SHARES | | |
|------------------|---------------|-----------|
| Number of Shares | Class/Series | Par Value |
| 100 | Common | |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 5 1 1 *

File Date: 2/17/00
Check No.: 959368
By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer [Signature] Date 1/31/00

Print or Type Name of Officer P. H. LATHAM

Title of Officer ASSISTANT TREASURER

PENTASTAR INSURANCE AGENCY, INC.

OFFICERS

| <u>NAME</u> | <u>TITLE</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|------------------------------------|--|
| J. S. Haan | President & Treasurer | 27777 Franklin Road Southfield, MI 48034-5168 |
| D. F. Browning | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| J. C. Bradley, Jr. | Vice President | 3605 Glenwood Avenue, Ste. 520 Raleigh, NC 27612 |
| P. A. Buteau | Vice President | 660 White Plains Road Tarrytown, NY 10591 |
| W. E. Harris | Vice President | 14 Sterling Street Wilkes Barre, PA 18702 |
| J. C. Ketter | Vice President | 300 Oxford Dr., #310 Monroeville, PA 15146-2229 |
| W. M. Keohane | Vice President | 4200 Parliament Place, Ste. 500 Lanham, MD 20706 |
| D. A. Pecoraro | Vice President | 6025 S. Quebec, Ste. 240 Englewood, CO 80111 |
| R. L. Taylor | Vice President | 1807 Park 170 Drive, Ste. 200 St. Louis, MO 63146 |
| G. F. Reicher | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| L. P. Smith | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| T. L. Hackman | Secretary & Chief Legal Officer | 27777 Franklin Road Southfield, MI 48034-5168 |
| P. H. Latham | Assistant Treasurer | 1000 Chrysler Drive Auburn Hills, MI 48326-2766 |

DIRECTORS:
D. F. BROWING
G. F. REICHER
J. S. HAAN

STOCKHOLDER: Chrysler Insurance Company
Authorized Capita: 100 shares of common stock. All shares have been issued and are outstanding.

Incorporated: July 30, 1990
Authorized to do business: Michigan
Head Office: 27777 Franklin Road, Southfield, Michigan 48034

p:\complain\cfc_tax\1998\pia.wpd

DaimlerChrysler Corporation
Office of Tax Affairs Cims: 485-12-30
1000 Chrysler Dr.
Auburn Hills, Mich U.S.A. 48326-2766

Corp. ID # 70511

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



| | | | |
|--|---------------|---|--------------------|
| 1. Corporate ID No. 70511 | | 2. Name of Corporation Pentastar Insurance Agency, Inc. | |
| 3. Street Address Principal Business Office 27777 Franklin Rd. | | City Southfield | State MI |
| 4. Business Phone No. (248) 512-3070 | | 5. State of Incorporation MICHIGAN | |
| 7. Brief Description of the Character of Business Conducted in Rhode Island Insurance | | 6. SIC Code 5702 | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| President Name J. S. Haan | | Vice President Name D. F. Browning | |
| Street Address Same as above | | Street Address Same as above | |
| City | State | City | Zip |
| Secretary Name T. L. Hackman | | Treasurer Name J. S. Haan | |
| Street Address Same as above | | Street Address Same as above | |
| City | State | City | Zip |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| Director Name J. S. Haan | | Director Name T. L. Hackman | |
| Street Address Same as above | | Street Address Same as above | |
| City | State | City | Zip |
| Director Name D. F. Browning | | Director Name J. W. James | |
| Street Address Same as above | | Street Address Same as above | |
| City | State | City | Zip |
| 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) | | 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) | |
| AUTHORIZED SHARES | | ISSUED SHARES | |
| Number of Shares | Class/Series | Number of Shares | Class/Series |
| 100 | Common | 100 | Common |
| Par Value | | Par Value | |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 5 1 1 *

File Date: May 1, 99
Check No.: 94457
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct to the best of knowledge and belief.

[Signature]
Signature of Officer
T. L. Hackman
Print or Type Name of Officer
Secretary
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70511** 2. Name of Corporation **Pentastar Insurance Agency, Inc.**

3. Street Address Principal Business Office **27777 FRANKLIN** City **SOUTHFIELD** State **Mi** Zip **48034**
4. Business Phone No. **248-512-3088** 5. State of Incorporation **MICHIGAN** 6. SIC Code **5702**

7. Brief Description of the Character of Business Conducted in Rhode Island
INSURANCE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

| | |
|--|--|
| President Name J. S. HAAN | Vice President Name D. F. BROWNING |
| Street Address 27777 FRANKLIN | Street Address Same As Above |
| City SOUTHFIELD State Mi Zip 48034 | City Same As Above State State Zip Zip |
| Secretary Name T. L. HACKMAN | Treasurer Name J. S. HAAN |
| Street Address Same As Above | Street Address Same As Above |
| City State Zip Zip | City State Zip Zip |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

| | |
|--|--|
| Director Name D. F. BROWN | Director Name J. S. HAAN |
| Street Address Same As Above | Street Address Same As Above |
| City State Zip Zip | City State Zip Zip |
| Director Name G. F. REICHER | Director Name |
| Street Address G. F. REICHER Same As Above | Street Address |
| City State Zip Zip | City State Zip Zip |

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | | |
|-------------------|---------------|-----------|
| Number of Shares | Class/Series | Par Value |
| 100 | Common | |

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

| ISSUED SHARES | | |
|------------------|---------------|-----------|
| Number of Shares | Class/Series | Par Value |
| 100 | Common | |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 0 5 1 1 *

File Date: **3.5.98**
Check No.: **07916**
By: **1UP**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. **to the best of my knowledge and belief**
Signature of Officer: **T. L. HACKMAN** Date: **2/26/98**
Print or Type Name of Officer: **T. L. HACKMAN**
Title of Officer: **SECRETARY**

PENTASTAR INSURANCE AGENCY, INC.

OFFICERS

| <u>NAME</u> | <u>TITLE</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|------------------------------------|--|
| J. S. Haan | President & Treasurer | 27777 Franklin Road Southfield, MI 48034-5168 |
| D. F. Browning | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| J. C. Bradley, Jr. | Vice President | 3605 Glenwood Avenue, Ste. 520 Raleigh, NC 27612 |
| P. A. Buteau | Vice President | 660 White Plains Road Tarrytown, NY 10591 |
| W. E. Harris | Vice President | 14 Sterling Street Wilkes Barre, PA 18702 |
| J. C. Ketter | Vice President | 300 Oxford Dr., #310 Monroeville, PA 15146-2229 |
| W. M. Keohane | Vice President | 4200 Parliament Place, Ste. 500 Lanham, MD 20706 |
| D. A. Pecoraro | Vice President | 6025 S. Quebec, Ste. 240 Englewood, CO 80111 |
| R. L. Taylor | Vice President | 1807 Park 170 Drive, Ste. 200 St. Louis, MO 63146 |
| G. F. Reicher | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| L. P. Smith | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| T. L. Hackman | Secretary & Chief Legal Officer | 27777 Franklin Road Southfield, MI 48034-5168 |
| P. H. Latham | Assistant Treasurer | 1000 Chrysler Drive Auburn Hills, MI 48326-2766 |

DIRECTORS:
D. F. BROWING
G. F. REICHER
J. S. HAAN

STOCKHOLDER:
Authorized Capita: Chrysler Insurance Company
100 shares of common stock. All shares have been issued and are
outstanding.

Incorporated:
July 30, 1990

Authorized to do business:
Michigan

Head Office:
27777 Franklin Road, Southfield, Michigan 48034

p:\complain\cfc_tax\1998\pia.wpd



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **70511** 2. Name of Corporation **Pentastar Insurance Agency, Inc.**
3. Street Address Principal Business Office **27777 FRANKLIN ROAD** City **SOUTHFIELD** State **MI** Zip **48034-5168**
4. Business Phone No. **(810) 512-3406** 5. State of Incorporation **MICHIGAN** 6. SIC Code **5702**
7. Brief Description of the Character of Business Conducted in Rhode Island

INSURANCE

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

| | |
|---|---|
| President Name J. S. HAAN Street Address 27777 FRANKLIN ROAD City SOUTHFIELD State MI Zip 48034-5168 | Vice President Name D.F. BROWNING Street Address 27777 FRANKLIN ROAD City SOUTHFIELD State MI Zip 48034-5168 |
| Secretary Name T.L. HACKMAN Street Address 27777 FRANKLIN ROAD City SOUTHFIELD State MI Zip 48034-5168 | Treasurer Name J. S. HAAN Street Address 27777 FRANKLIN ROAD City SOUTHFIELD State MI Zip 48034-5168 |

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

| | |
|---|--|
| Director Name D.F. BROWNING Street Address 27777 FRANKLIN ROAD City SOUTHFIELD State MI Zip 48034-5168 | Director Name J. S. HAAN Street Address 27777 FRANKLIN ROAD City SOUTHFIELD State MI Zip 48034-5168 |
| Director Name G. F. REICHER Street Address 27777 FRANKLIN ROAD City SOUTHFIELD State MI Zip 48034-5168 | |

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

| AUTHORIZED SHARES | | | ISSUED SHARES | | |
|-------------------|--------------|-----------|------------------|--------------|-----------|
| Number of Shares | Class/Series | Par Value | Number of Shares | Class/Series | Par Value |
| 100 | COMMON | — | 100 | COMMON | — |

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 2/24/97
Check No.: 190376
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.
Signature of Officer: [Signature] Date: 2/17/97
Print or Type Name of Officer: T. L. HACKMAN
Title of Officer: SECRETARY

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

| | | | | | | | |
|--|----------------|--|------------------|---|---------------------|-------------------|----------------|
| 1. CORPORATE ID NO. 70511 | | 2. NAME OF CORPORATION Pentastar Insurance Agency, Inc. | | | | | |
| 3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 27777 FRANKLIN RD | | | | CITY SOUTHFIELD | STATE MI | ZIP CODE 48034 | |
| 4. BUSINESS PHONE NO. 810-948-3058 | | 5. STATE OF INCORPORATION MICHIGAN | | | 6. SIC CODE 8888 | | |
| 7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND INSURANCE | | | | | | | |
| 8. NAMES AND ADDRESSES OF THE OFFICERS | | | | | | | |
| PRESIDENT NAME D. E. Browning | | | | VICE PRESIDENT NAME J. S. Bradley Jr. | | | |
| STREET ADDRESS 27777 Franklin Road LIST ATTACHED | | | | STREET ADDRESS 3605 Glenwood Ave. Ste. 520 | | | |
| CITY Southfield | | STATE MI | | CITY Raleigh | | STATE NC | |
| ZIP CODE 48034 | | ZIP CODE 48034 | | ZIP CODE 27612 | | ZIP CODE 27612 | |
| SECRETARY NAME T. L. Hackman | | | | TREASURER NAME J. S. Hagan | | | |
| STREET ADDRESS 27777 Franklin Road | | | | STREET ADDRESS 27777 Franklin Rd. | | | |
| CITY Southfield | | STATE MI | | CITY Southfield | | STATE MI | |
| ZIP CODE 48034 | | ZIP CODE 48034 | | ZIP CODE 48034 | | ZIP CODE 48034 | |
| 9. NAMES AND ADDRESSES OF THE DIRECTORS | | | | | | | |
| DIRECTOR NAME LIST ATTACHED | | | | DIRECTOR NAME D. E. Browning | | | |
| STREET ADDRESS LIST ATTACHED | | | | STREET ADDRESS 27777 Franklin Road | | | |
| CITY LIST ATTACHED | | STATE LIST ATTACHED | | CITY Southfield | | STATE MI | |
| ZIP CODE LIST ATTACHED | | ZIP CODE LIST ATTACHED | | ZIP CODE 48034 | | ZIP CODE 48034 | |
| DIRECTOR NAME A. M. Winterfield | | | | DIRECTOR NAME A. M. Winterfield | | | |
| STREET ADDRESS 27777 Franklin Road | | | | STREET ADDRESS 27777 Franklin Road | | | |
| CITY Southfield | | STATE MI | | CITY Southfield | | STATE MI | |
| ZIP CODE 48034 | | ZIP CODE 48034 | | ZIP CODE 48034 | | ZIP CODE 48034 | |
| 10. SHARES AUTHORIZED AND ISSUED | | | | | | | |
| AUTHORIZED SHARES | | | | ISSUED SHARES | | | |
| NUMBER OF SHARES | CLASS / SERIES | PAR VALUE | NUMBER OF SHARES | CLASS / SERIES | PAR VALUE | NUMBER OF SHARES | CLASS / SERIES |
| 100 | Common | - | 100 | Common | - | | |
| | | | | | | | |

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

T. L. HACKMAN

Print or Type Name of Officer

SECRETARY

Title of Officer

1-31-96

Date

File Date:

3/1/96

Check No:

17029

ATFB

By:

For Secretary of State Use Only

PENTASTAR INSURANCE AGENCY, INC.

OFFICERS

| <u>NAME</u> | <u>TITLE</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|------------------------|--|
| D. F. Browning | President | 27777 Franklin Road Southfield, MI 48034-5168 |
| J. C. Bradley, Jr. | Vice President | 3605 Glenwood Avenue, Ste. 520 Raleigh, NC 27612 |
| P. A. Buteau | Vice President | 660 White Plains Road Tarrytown, NY 10591 |
| W. E. Harris | Vice President | 14 Sterling Street Wilkes Barre, PA 18702 |
| J. G. Ketter | Vice President | 300 Oxford Dr., #310 Monroeville, PA 15146-2229 |
| W. M. Keohane | Vice President | 4200 Parliament Place, Ste. 500 Lanham, MD 20706 |
| D. A. Pecoraro | Vice President | 6025 S. Quebec, Ste. 240 Englewood, CO 80111 |
| R. L. Taylor | Vice President | 1807 Park 170 Drive, Ste. 200 St. Louis, MO 63146 |
| A. M. Winterfield | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| J. S. Haan | Controller & Treasurer | 27777 Franklin Road Southfield, MI 48034-5168 |
| T. L. Hackman | Secretary | 27777 Franklin Road Southfield, MI 48034-5168 |
| P. H. Latham | Assistant Controller | 27777 Franklin Road Southfield, MI 48034-5168 |

PENTASTAR INSURANCE AGENCY, INC.

DIRECTORS

| <u>NAME</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|--|
| D. F. Browning | 27777 Franklin Road Southfield, MI 48034-5168 |
| A. M. Winterfield | 27777 Franklin Road Southfield, MI 48034-5168 |



ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0070511 Annual Report for the year: 1995

Name of Corporation: Pentastar Insurance Agency, Inc.

Business entity organized under the laws of the State of: RI

Business Entity is (check one):

For foreign entity, address and telephone number of principal office:

Business Corporation (See RIGL Chapter 7-1.1)

27777 FRANKLIN RD.
SOUTHFIELD, MI 48034

Professional Service Corporation (See RIGL Chapter 7-5.1)

Phone: 810 948-3246

Brief statement of the character of business conducted in Rhode Island:

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

INSURANCE

Phone: ()

THE NAMES OF THE OFFICERS ARE:

| OFFICER | STREET ADDRESS | CITY/STATE | ZIP CODE |
|----------------|----------------------|------------|----------|
| PRESIDENT | | | |
| VICE PRESIDENT | | | |
| SECRETARY | <u>LIST ATTACHED</u> | | |
| TREASURER | | | |

THE NAMES OF THE DIRECTORS ARE:

| NAME | STREET ADDRESS | CITY/STATE | ZIP CODE |
|------|----------------------|------------|----------|
| | | | |
| | | | |
| | <u>LIST ATTACHED</u> | | |
| | | | |

| NUMBER OF SHARES AUTHORIZED (Rider may be attached) | | NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached) | |
|---|----------------|---|----------------|
| Number of Shares | Class / Series | Number of Shares | Class / Series |
| <u>100</u> | <u>COMMON</u> | <u>100</u> | <u>COMMON</u> |

Date FEB 3 1995 By: [Signature]

R.H. LATHAM
PRINT OR TYPE NAME OF OFFICER SIGNING
ASST. CONTROLLER
TITLE OF OFFICER SIGNING

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

CT CORPORATION SYSTEM
123 DYER STREET
PROVIDENCE RI 02903

FILED

FEB 10 1995

By [Signature] 140299

PENTASTAR INSURANCE AGENCY, INC.

OFFICERS

| <u>NAME</u> | <u>TITLE</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|--------------------------------------|--|
| T. W. Sidlik | Chairman of the Board & President | 27777 Franklin Road Southfield, MI 48034-5168 |
| D. F. Browning | Executive Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| J. C. Bradley, Jr. | Vice President | 3605 Glenwood Avenue, Ste. 520 Raleigh, NC 27612 |
| P. A. Buteau | Vice President | 660 White Plains Road Tarrytown, NY 10591 |
| W. E. Harris | Vice President | 14 Sterling Street Wilkes Barre, PA 18702 |
| J. G. Ketter | Vice President | 300 Oxford Dr., #310 Monroeville, PA 15146-2229 |
| W. M. Keohane | Vice President | 4200 Parliament Place, Ste. 500 Lanham, MD 20706 |
| D. A. Pecoraro | Vice President | 6025 S. Quebec, Ste. 240 Englewood, CO 80111 |
| K. J. Robison | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| R. L. Taylor | Vice President | 1807 Park 170 Drive, Ste. 200 St. Louis, MO 63146 |
| A. M. Winterfield | Vice President | 27777 Franklin Road Southfield, MI 48034-5168 |
| T. P. Dykstra | Controller | 27777 Franklin Road Southfield, MI 48034-5168 |
| R. A. Link | Secretary | 27777 Franklin Road Southfield, MI 48034-5168 |
| D. A. Robison | Treasurer | 27777 Franklin Road Southfield, MI 48034-5168 |
| P. H. Latham | Assistant Controller | 27777 Franklin Road Southfield, MI 48034-5168 |

PENTASTAR INSURANCE AGENCY, INC.

DIRECTORS

| <u>NAME</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|--|
| T. P. Dykstra | 27777 Franklin Road Southfield, MI 48034-5168 |
| D. F. Browning | 27777 Franklin Road Southfield, MI 48034-5168 |
| T. W. Sidlik | 27777 Franklin Road Southfield, MI 48034-5168 |
| A. M. Winterfield | 27777 Franklin Road Southfield, MI 48034-5168 |

Filing Fee \$50.00
payable to
Secretary of State

PLEASE TYPE OR PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0070511 Annual Report for the year: 1994

Name of Business Entity: Pentastar Insurance Agency, Inc.

Business entity organized under the laws of the State of RI
Federal Taxpayer Identification Number: [REDACTED]
or foreign entity, address and telephone number of principal office:
2777 FRANKLIN RD
SOUTHFIELD, MI 48034
Phone: (313) 948-3246
Address and telephone of the principal office of business entity in Rhode
Island (Provide street address - Not P.O. Box):
NONE
Phone ()

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)
 Limited Liability Company (See RIGL 7-16)
Name, title and mailing address of contact person to whom
communications may be directed:
G. FORD
TAX REPRESENTATIVE
2777 FRANKLIN RD
SOUTHFIELD, MI 48034
Brief statement of the character of business conducted in Rhode Island:
INSURANCE
Date of Organization: JULY 30, 1990
Date of Qualification to do business in Rhode Island (if foreign entity)
12/3/92 - CA

THE NAMES OF THE OFFICERS ARE:

CHIEF EXECUTIVE OFFICER OR PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE
LIST ATTACHED
 CHIEF OPERATING OFFICER OR VICE PRESIDENT (Check One) STREET ADDRESS CITY/STATE ZIP CODE
 CLERK/CHIEF OF RECORDS OR SECRETARY (Check One) STREET ADDRESS CITY/STATE ZIP CODE
 CHIEF FINANCIAL OFFICER OR TREASURER (Check One) STREET ADDRESS CITY/STATE ZIP CODE

THE NAMES OF THE DIRECTORS ARE:

NAME STREET ADDRESS CITY/STATE ZIP CODE
LIST ATTACHED
NAME STREET ADDRESS CITY/STATE ZIP CODE
NAME STREET ADDRESS CITY/STATE ZIP CODE

| NUMBER OF SHARES AUTHORIZED (If Applicable) | NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable) |
|---|---|
| NUMBER <u>100</u> | NUMBER <u>100</u> |
| CLASS <u>Common</u> | CLASS <u>Common</u> |
| SERIES | SERIES |
| PAR VALUE OR WITHOUT PAR | PAR VALUE OR WITHOUT PAR |

Date: FEBRUARY 3 19 94 By: X [Signature]
FILED
FEB 11 1994
By: [Signature]
R.A. LINK
PRINT OR TYPE NAME OF OFFICER SIGNING
SECRETARY
TITLE OF OFFICER SIGNING

Form 31 '94 DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

Filing Fee \$50.00

93804713

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0070511 Annual Report for the year 1993

FIRST: The name of the corporation is Pentastar Insurance Agency, Inc.

SECOND: It is incorporated under the laws of MICHIGAN

THIRD: Character of business, briefly stated, is INSURANCE

FOURTH: If foreign corporation, address of its principal office 22777 PARADISE RD
SOUTHFIELD MI 48034

FIFTH: Business address in Rhode Island NONE

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name Office Address (including number, street, zip code)

| | | |
|-------|----------------|---------------------------|
| ..... | Director | ..... |
| ..... | Director | ..... |
| ..... | Director | <u>SCHEDULES ATTACHED</u> |
| ..... | President | ..... |
| ..... | Vice President | ..... |
| ..... | Secretary | ..... |
| ..... | Treasurer | ..... |

SEVENTH: Number of Shares authorized:

| | | | |
|---------------|-------|--------|--|
| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|-------|--------|--|

PAID

MAR 01 1993

EIGHTH: Number of Shares issued:

| | | | |
|---------------|-------|--------|--|
| No. of Shares | Class | Series | Par Value or statement that shares are without par value |
|---------------|-------|--------|--|

SECRETARY OF STATE

Dated Feb 8 19 93
Kenneth D. Johnson
 Notary Public, Washtenaw County, Michigan
 Acting in Washtenaw County, Michigan
 My Commission Expires September 10, 1995
 (Report must be signed by an officer)

PENTASTAR INSURANCE AGENCY, INC
 (Name of Corporation)
 By [Signature]
 Title SECRETARY
R. A. LINK

PENTASTAR INSURANCE AGENCY, INC.

OFFICERS

| <u>NAME</u> | <u>TITLE</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|---|---|
| J. P. Tierney | Chairman of the Board | 27777 Franklin Road Southfield, MI 48034 |
| T. J. Osborn | Executive Vice President - Finance | 27777 Franklin Road Southfield, MI 48034 |
| J. B. Fisher | Executive Vice President and General Manager | 27777 Franklin Road Southfield, MI 48034 |
| D. M. Cantwell | Vice President - Corporate Finance and Development | 27777 Franklin Road Southfield, MI 48034 |
| P. E. Anders, Jr. | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| L. K. Biskner | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| D. F. Browning | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| J. J. Muzyk | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| L. A. Neeb | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| A. L. Ronquillo | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| B. R. White | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| A. M. Winterfield | Vice President | 27777 Franklin Road Southfield, MI 48034 |
| J. A. ChamaSrour | Controller | 27777 Franklin Road Southfield, MI 48034 |
| R. A. Link | Secretary | 27777 Franklin Road Southfield, MI 48034 |
| D. A. Robison | Treasurer | 27777 Franklin Road Southfield, MI 48034 |
| B. C. Babbish | Assistant Secretary | 27777 Franklin Road Southfield, MI 48034 |
| P. DiMambro | Assistant Controller | 27777 Franklin Road Southfield, MI 48034 |
| J. S. Haan | Assistant Controller | 27777 Franklin Road Southfield, MI 48034 |
| P. H. Latham | Assistant Controller | 27777 Franklin Road Southfield, MI 48034 |
| M. A. Nixon | Assistant Treasurer | 27777 Franklin Road Southfield, MI 48034 |
| J. J. Shea | Assistant Treasurer | 27777 Franklin Road Southfield, MI 48034 |
| W. A. Wood | Assistant Controller | 27777 Franklin Road Southfield, MI 48034 |

PENTASTAR INSURANCE AGENCY, INC.

DIRECTORS

| <u>NAME</u> | <u>BUSINESS ADDRESS</u> |
|--------------------|---|
| J. E. Farrell | 27777 Franklin Road Southfield, MI 48034 |
| J. B. Fisher | 27777 Franklin Road Southfield, MI 48034 |
| T. J. Osborn | 27777 Franklin Road Southfield, MI 48034 |
| D. A. Robison | 27777 Franklin Road Southfield, MI 48034 |
| A. L. Ronquillo | 27777 Franklin Road Southfield, MI 48034 |
| J. P. Tierney | 27777 Franklin Road Southfield, MI 48034 |