

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 805954

1. Corporation Name

TOYOTA MOTOR INSURANCE COMPANY

Principal Place of Business

19001 S. WESTERN AVENUE
TORRANCE CA 90501-1106

Mailing Address

C/O CORP. TAX DEPT.
19001 S. WESTERN AVE.
TORRANCE CA 90501
US

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90075 026 ****61.25

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2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

07/23/1945

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

33-0398726

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **GIESZL, YALE**
STREET ADDRESS **19001 S. WESTERN AVENUE**
CITY-ST-ZIP **TORRANCE CA**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

SCHEDULE ATTACHED

TITLE **VPD** ☐ DELETE
NAME **AUST, JAMES**
STREET ADDRESS **19001 S. WESTERN AVE.**
CITY-ST-ZIP **TORRANCE CA**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **VPT** ☐ DELETE
NAME **NOBU SHIGEMI**
STREET ADDRESS **19001 S WESTERN AVE**
CITY-ST-ZIP **TORRANCE CA**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **AD** ☐ DELETE
NAME **ROBERT PITTS**
STREET ADDRESS **19001 S. WESTERN AVENUE**
CITY-ST-ZIP **TORRANCE CA**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **SVP** ☐ DELETE
NAME **BORST, GEORGE E**
STREET ADDRESS **19001 S. WESTERN AVENUE**
CITY-ST-ZIP **TORRANCE CA**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **P** ☐ DELETE
NAME **ISHIZAKA, YOSHIO**
STREET ADDRESS **19001 S. WESTERN AVENUE**
CITY-ST-ZIP **TORRANCE CA**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
George E. Borst
Senior Vice President

1/22/99

(310) 618-5090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)

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TOYOTA MOTOR INSURANCE COMPANY
Officers and Directors

TITLE	FORMER¹	CURRENT²
President	Y. Ishizaka	o Y. Ishizaka
SVP	o N. Shigemi	o N. Shigemi
SVP	o G. Borst	o G. Borst
VP & General Manager	o J. Aust (R7-15-98)	o J. Beseda (E7-15-98)
Secretary	A. Cohen	A. Cohen
Assistant Secretary	o R. Pitts	o R. Pitts
Treasurer	N. Shigemi	N. Shigemi
Director	o Y. Gieszl	o Y. Gieszl
Director	o T. Nishiyama(R5-1-98)	o C. Yamaguchi(E 5-1-98)
Director	o D. West	o D. West