

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

APPROVED AND FILED

95 MAR -2 PM 3:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3-2-95 81725-C  
CORPORATION  
ANNUAL REPORT  
1995

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

DOCUMENT # **P40356** (8)  
1. Corporation Name  
**FAR WEST INSURANCE COMPANY**

Principal Place of Business Mailing Address  
**6320 CANOGA AVE SUITE 300 WOODLAND HILLS CA 91367 US**  
**P.O. BOX 4500 WOODLAND HILL S 91365-4500 US**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

3. Date Incorporated or Qualified **09/04/1992** 3a. Date of Last Report **03/18/1994**  
4. FEI Number **95-3858625** Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$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  
**FLORIDA INSURANCE COMMISSIONER  
THE CAPITOL  
TALLAHASSEE FL 32399-0300**

10. Name and Address of New Registered Agent  
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 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 \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature, typed or printed name of registered agent and his or her address) (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	<b>C</b>
NAME	<b>SAVAGE, RICHARD H.</b>
STREET ADDRESS	<b>6320 CANOGA AVE. #300</b>
CITY- ST- ZIP	<b>WOODLAND HILLS CA</b>
TITLE	<b>VC</b>
NAME	<b>SAVAGE, JOHN E.</b>
STREET ADDRESS	<b>6320 CANOGA AVE. #300</b>
CITY- ST- ZIP	<b>WOODLAND HILLS CA</b>
TITLE	<b>VD</b>
NAME	<b>KAY, STEVEN R.</b>
STREET ADDRESS	<b>6320 CANOGA AVE. #300</b>
CITY- ST- ZIP	<b>WOODLAND HILLS CA</b>
TITLE	<b>VD</b>
NAME	<b>MELTON, ARTHUR F.</b>
STREET ADDRESS	<b>6320 CANOGA AVE. #300</b>
CITY- ST- ZIP	<b>WOODLAND HILLS CA</b>
TITLE	<b>V</b>
NAME	<b>PONT, NEIL F.</b>
STREET ADDRESS	<b>6320 CANOGA AVE. #300</b>
CITY- ST- ZIP	<b>WOODLAND HILLS CA</b>
TITLE	<b>V</b>
NAME	<b>DRUEZ, JANICE J.</b>
STREET ADDRESS	<b>6320 CANOGA AVE. #300</b>
CITY- ST- ZIP	<b>WOODLAND HILLS CA</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>No longer holding position</b>
6.3 STREET ADDRESS	<b>(See attached for listing of Officers and Directors).</b>
6.4 CITY- ST- ZIP	

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 110.07(3)(b), 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 of above part, or on an attachment with an address.

SIGNATURE: *Phillip E. Huff* **PHILLIP E. HUFF**  
Vice President/Treasurer 2-22-95 (818) 704-1111  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR (Date) (Typed Name)

Directors and Officers Information

000042635040200



Middle Name	Suffix	Social Security Number	Date of Birth	P o s i t i o n	Hold Since	Leased Employment	Changed Position	Street 1	Street 2	Street 3	City	St	Zip
Barrison		565-83-1542	09/02/1919	D	12/02/1976			P. O. Box 2717			Friday Harbor	WA	98254
East		548-95-3958	11/07/1958	D	12/02/1976			22541 Octavia Road			Woodland Hills	CA	91364
Zay		509-20-4891	04/09/1937	D	11/29/1988			P. O. Box 549			Paso Robles	CA	91347
Lee		056-14-5143	09/02/1918	D	03/02/1988			350 North Inglewood Place			Los Angeles	CA	90094
Feschell		569-82-2319	02/02/1954	B	04/30/1992			23933 Eagle Mountain			West Hills	CA	91384
Ford		564-84-3789	07/27/1954	B	11/29/1990			408 East Padre Street			Santa Barbara	CA	93107
Fredrick		641-78-1656	05/15/1945	B	11/11/1991			3525 Tapp Street			Sierra Valley	CA	91063
Barrison		213-58-8142	10/20/1959	D	05/13/1991			2132 23rd Street			Santa Monica	CA	90405
Allan		551-62-1702	09/24/1944	D	07/24/1983			23414 Balcoral Lane			West Hills	CA	91317
Eric		591-33-4561	07/07/1961	D	11/01/1988			22446 Las Campanas Avenue			Valencia	CA	91354
Carria		599-17-5518	09/13/1951	D	03/09/1992			52 Del Rey Circle			Thousand Oaks	CA	91320
Ernest		480-76-4138	08/28/1956	D	06/01/1993			4589 Vista Del Valle Drive			Northridge	CA	91324
Alan		122-48-4257	10/26/1962	D	05/02/1988			7807 Raymond Avenue			West Hills	CA	91324
Kathary		573-94-9448	12/02/1955	D	07/17/1990			12208 Cherygrove Street			Northridge	CA	91324
Ernest		655-32-6561	05/30/1954	D	09/16/1993			24769 Calle Concho			Calabasas	CA	91301
Lucia		465-52-3713	11/15/1941	D	07/30/1984			21620 Myrice Street #231			Woodland Hills	CA	91380
Kathleen		567-86-5268	06/12/1943	D	03/04/1984			21695 Yucatan Avenue			Woodland Hills	CA	91387
Carie		318-48-2882	05/25/1953	D	03/04/1994			7119 El Paso			Woodland Hills	CA	91387
Shelba		299-31-9182	04/26/1954	D	03/04/1994			2515 Winetka Mill			Long Beach	CA	90801
Alan		282-32-1483	03/03/1942	D	03/04/1994			24723 Via Del Lemo			Canoga Park	CA	91306
Pat		447-42-4742	02/06/1949	D	03/04/1994			293 Latentview Drive			Calabasas	CA	91306
Pat		554-33-3488	09/09/1964	D	03/04/1994			19522 West Castridge Road			Fairfield	CA	94502
								7038 Decelis Place #19			Montebello	CA	91754
											Van Nuys	CA	91406