

AFFIDAVIT OF COMPLIANCE WITH
EMERGENCY RULE 69OER04-19
PART I
Tropical Storm Bonnie, Hurricanes Charley and Frances

STATE OF _____

COUNTY OF _____

BEFORE ME, the undersigned authority, personally appeared _____, who, being duly sworn, deposes and says:

1. My name is _____. I am employed as an officer or director of _____ (hereafter referred to as insurer).
2. I have personal knowledge of insurer's compliance with Emergency Rule 69OER04-19, and the conditions and requirements of said rule.
3. I hereby attest that as of November 22, 2004 (Initial the following paragraph that applies):

_____ All personal lines residential property claims related to Hurricanes Charley, Frances and Tropical Storm Bonnie damage in Florida reported to insurer on or before October 21, 2004, meet all conditions and requirements of Emergency Rule 69OER04-19.

_____ All personal lines residential property claims related to Hurricanes Charley, Frances and Tropical Storm Bonnie damage in Florida reported to insurer on or before October 21, 2004, did not meet all conditions and requirements of Emergency Rule 69OER04-19. A listing of each claim not in compliance as of November 22, 2004, will be provided to the Office of Insurance Regulation no later than December 7, 2004.

_____ No personal lines residential property claims related to Hurricanes Charley, Frances and Tropical Storm Bonnie damage in Florida were reported to insurer as of October 21, 2004.

FURTHER AFFIANT SAYETH NAUGHT.

Sworn to and subscribed before me
the undersigned authority this _____
day of _____, 2004.

NOTARY PUBLIC
STATE OF _____

My Commission Expires:

FILED
2004 OCT 26 PM 3:02
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA