

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F31702

FILED
Jan 20, 2017
Secretary of State
CC6080037104

Entity Name: OLD DOMINION INSURANCE COMPANY

Current Principal Place of Business:

4601 TOUCHTON ROAD EAST
SUITE 3400
JACKSONVILLE, FL 32246

Current Mailing Address:

4601 TOUCHTON ROAD EAST
SUITE 3400
JACKSONVILLE, FL 32246 US

FEI Number: 59-2070420

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FOX, BRUCE R
4601 TOUCHTON ROAD EAST
SUITE 3400
JACKSONVILLE, FL 32246 US

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: BRUCE R FOX

01/20/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name GUNTER, WILLIAM DJR.
Address 4601 TOUCHTON RD. EAST, STE. 3400
City-State-Zip: JACKSONVILLE FL 32246

Title T
Name KUHL, EDWARD J
Address 4601 TOUCHTON RD E, STE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title P
Name COX, CHRISTOPHER L
Address 4601 TOUCHTON ROAD EAST SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title S
Name FOX, BRUCE R
Address 4601 TOUCHTON RD. EAST, STE. 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name BAXTER, TERRY L
Address 4601 TOUCHTON ROAD EAST SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name CLEVELAND, COTTON M
Address 4601 TOUCHTON ROAD EAST SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name DELANEY, JOHN A
Address 4601 TOUCHTON ROAD EAST SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name DOERR, ROBERT C
Address 4601 TOUCHTON ROAD EAST SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

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I hereby 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 all other like empowered.

SIGNATURE: BRUCE R FOX

SECRETARY

01/20/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ELFNER, ALBERT H
Address 4601 TOUCHTON ROAD EAST
SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name KESNER, IDALENE F
Address 4601 TOUCHTON ROAD EAST
SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name VAN BERKEL, THOMAS M
Address 4601 TOUCHTON ROAD EAST
SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title VP
Name DORMAN, DEAN P
Address 4601 TOUCHTON ROAD EAST
SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name FREEMAN, DAVID
Address 4601 TOUCHTON ROAD EAST
SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name MORLEY, JAMES E
Address 4601 TOUCHTON ROAD EAST
SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246

Title VP
Name GIORDANO-RAMOS, NANCY
Address 4601 TOUCHTON ROAD EAST
SUITE 3400
City-State-Zip: JACKSONVILLE FL 32246