2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K31071

Entity Name: SECURITY NATIONAL INSURANCE COMPANY

FILED Mar 24, 2022 Secretary of State 0359747545CC

Current Principal Place of Business:

1300 CONCORD TERRACE.

SUITE 120

SUNRISE, FL 33323

Current Mailing Address:

TAX DEPARTMENT PO BOX 2450 GRAND RAPIDS, MI 49501 US

FEI Number: 65-0109120 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	PRESIDENT, DIRECTOR	Title	VP, TREASURER
Name	KOOPMAN, BRONWYN E	Name	AGUILERA, MARIA E

Address **ROCKSIDE CENTER III** Address 1300 CONCORD TERRACE 5990 W CREEK RD

STE 120

SUNRISE FL 33323 INDEPENDENCE OH 44131 City-State-Zip: City-State-Zip:

Title VΡ Title VΡ

Name MC CARTHY, VICTORIA L Name NOH, THOMAS S

6301 OWENSMOUTH AVE 6301 OWENSMOUTH AVE Address Address

City-State-Zip: WOODLAND HILLS CA 91367 City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR Title ASST. TREASURER

Name BROWN, THOMAS D BARNES, GRETCHEN L Name Address 6301 OWENSMOUTH AVE Address 5600 BEECH TREE LANE

City-State-Zip: WOODLAND HILLS CA 91367 City-State-Zip: CALEDONIA MI 49316

Title VР Title VP, DIRECTOR

BAUR, MAITE I Name Name WILLIAMS, TODD M

6301 OWENSMOUTH AVE Address Address 1300 CONCORD TERRACE

City-State-Zip: WOODLAND HILLS CA 91367 City-State-Zip: SUNRISE FL 33323

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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: GRETCHEN L. BARNES

ASSISTANT TREASURER

03/24/2022

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name LORCH, DENNIS J Name MYHAN, RONALD G

Address 6301 OWENSMOUTH AVE Address 6301 OWENSMOUTH AVE

City-State-Zip: WOODLAND HILLS CA 91367 City-State-Zip: WOODLAND HILLS CA 91367

TitleSECRETARYTitleASST. TREASURERNamePOPP, MAURA CNameTOMICH, ANTHONY WAddress3 BEAVER VALLEY RDAddress6301 OWENSMOUTH AVECity-State-Zip:WILMINGTON DE 19803City-State-Zip:WOODLAND HILLS CA 91367