#### 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153159

Entity Name: HORACE MANN MGA AND BROKERAGE OF FLORIDA, INC.

FILED Apr 27, 2020 Secretary of State 5949748388CC

## **Current Principal Place of Business:**

1 HORACE MANN PLAZA SPRINGFIELD, IL 62715-0001

## **Current Mailing Address:**

1 HORACE MANN PLAZA

SPRINGFIELD. IL 62715-0001 US

FEI Number: 20-0500272 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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

CONKLIN, BRET A

#### Officer/Director Detail:

Title	DIRECTOR, CHAIRMAN, PRESIDENT &	Title	DIRECTOR, EXEC VP & CFO
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Name

CEO

Name ZURAITIS, MARITA Address 1 HORACE MANN PLAZA

Address 1 HORACE MANN PLAZA

City-State-Zip: SPRINGFIELD IL 62715

City-State-Zip: SPRINGFIELD IL 62715

Title VP & TREASURER

ORP SECRETARY & CCO Name GAYLE, TROY M

CORP SECRETARY & CCO Name GAYLE, TROY M

Name CARLEY, DONALD M Address 1 HORACE MANN PLAZA

Address 1 HORACE MANN PLAZA City-State-Zip: SPRINGFIELD IL 62715

City-State-Zip: SPRINGFIELD IL 62715

Title AVP & TAX DIRECTOR

Title DIRECTOR Name STUENKEL, JEREMY

Name CALDWELL, WILLIAM J Address 1 HORACE MANN PLAZA

Address 1 HORACE MANN PLAZA City-State-Zip: SPRINGFIELD IL 62715

City-State-Zip: SPRINGFIELD IL 62715 Title DIRECTOR, EVP

Title DIRECTOR, EVP Name RUGENSTEIN, WADE A

Name SHARPE, MATTHEW P Address 1 HORACE MANN PLAZA

City State 7 in CREIN CEIFL B. II. 60745

Address 1 HORACE MANN PLAZA City-State-Zip: SPRINGFIELD IL 62715

City-State-Zip: SPRINGFIELD IL 62715 Continues on page 2

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: JEREMY STUENKEL AVP, TAX DIRECTOR 04/27/2020

# Officer/Director Detail Continued:

Title VP Title CORPORATE SECRETARY

Name CLOSTER, DONALD L Name MICHAEL, LINEA K

Address 1 HORACE MANN PLAZA

City-State-Zip: SPRINGFIELD IL 62715

Address 1 HORACE MANN PLAZA

City-State-Zip: SPRINGFIELD IL 62715

Title ASSISTANT VP & TAX COMPLIANCE OFFICER Title DIRECTOR

NameBARNETT, DIANE MNameMOORE, ELIZABETH PAddress1 HORACE MANN PLAZAAddress1 HORACE MANN PLAZACity-State-Zip:SPRINGFIELD IL 62715City-State-Zip:SPRINGFIELD IL 62715-0001

Title VP

Name JOHNSON, KIMBERLY A
Address 1 HORACE MANN PLAZA
City-State-Zip: SPRINGFIELD IL 62715-0001