2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000110432

Entity Name: AMERICAN TRADITIONS INSURANCE COMPANY

Current Principal Place of Business:

7785 66TH STREET

PINELLAS PARK, FL 33781

Current Mailing Address:

7785 66TH STREET

PINELLAS PARK, FL 33781 US

FEI Number: 20-3159417 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 EAST GAINES STREET TALLAHASSEE, FL 32399 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

FILED Mar 20, 2024

Secretary of State

5076642757CC

Officer/Director Detail :

Title CEO, CHAIRMAN, DIRECTOR Title PRESIDENT, DIRECTOR JERGER, THOMAS J Name Name JERGER, T JOHN

Address **7785 66TH STREET** Address **7785 66TH STREET**

PINELLAS PARK FL 33781 PINELLAS PARK FL 33781 City-State-Zip: City-State-Zip:

Title EXECUTIVE VP, GENERAL COUNSEL Title **CFOD**

& CORPORATE SECRETARY, ADAMSKI, BRIAN J DIRECTOR

Name

5526 GARDEN ARBOR DRIVE Name BLACKLIDGE, RAYMOND M Address

7785 66TH STREET City-State-Zip: LUTZ FL 33558 Address

City-State-Zip: PINELLAS PARK FL 33781 Title VP, DIRECTOR

CHIEF RISK OFFICER AND Name HURLEY. DAN L Title

CONTROLLER

Address 5815 NEW PARIS WAY LOCKE, JUSTIN D Name

ELLENTON FL 34222 City-State-Zip: Address 7320 LEXINGTON LANE

City-State-Zip: LARGO FL 33764 Title DIRECTOR

YANCHUCK, JOEL P Name

Title DIRECTOR

Address 1079 ASHLAND AVENUE Name HALL, GREGORY S

TARPON SPRINGS FL 34689 City-State-Zip: Address 217 GOVERNOR GLEN DRIVE

> City-State-Zip: SUNSET SC 29685

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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.

03/20/2024 SIGNATURE: RAYMOND BLACKLIDGE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name JERGER, RICHARD M JR Name LINDGREN, KETIH CPA

Address 7963 9TH AVENUE S Address 725 HAWKVIEW ROAD

City-State-Zip: ST PETERSBURG FL 33707 City-State-Zip: TOWNSEND TN 37882

Title DIRECTOR Title DIRECTOR

Name BRAUN, STEPHEN Name RYAN, GAVIN

Address 5000 DOWN POINT LANE Address 15301 SPECTRUM DRIVE STE 500

City-State-Zip: WINDERMERE FL 34786 City-State-Zip: ADDISON TX 75001

TitleDIRECTORTitleVP MARKETINGNameJERGER, SANDRANameSOUSA, JENNIFER

Address 7785 66TH STREET Address 7785 66TH STREET

City-State-Zip: PINELLAS PARK FL 33781 City-State-Zip: PINELLAS PARK FL 33781

TitleVP OF LITIGATIONTitleVP OF CLAIMSNameEWIN, DANIELNameJERGER, TED

Address 7785 66TH STREET Address 7785 66TH ST N

City-State-Zip: PINELLAS PARK FL 33781 City-State-Zip: PINELLAS PARK FL 33781