

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000117393

**Entity Name:** AUTO CLUB INSURANCE COMPANY OF FLORIDA

**FILED**  
**Jun 09, 2020**  
**Secretary of State**  
**5448472290CC**

**Current Principal Place of Business:**

9125 HENDERSON ROAD  
FOURTH FLOOR  
TAMPA, FL 33634

**Current Mailing Address:**

9125 HENDERSON ROAD  
FOURTH FLOOR  
TAMPA, FL 33634 US

**FEI Number:** 20-5529611

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E GAINES ST  
PO BOX 6200  
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

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            CORRIGAN, PETER  
Address        9125 HENDERSON ROAD  
City-State-Zip: TAMPA FL 33634

Title            CFO, VP  
Name            WIEDRICK, JENNIFER A.  
Address        9125 HENDERSON ROAD  
City-State-Zip: TAMPA FL 33634

Title            DIRECTOR, CHAIRMAN, EVP,  
                  TREASURER  
Name            MALONEY, SEAN H.  
Address        1 AUTO CLUB GROUP  
City-State-Zip: DEARBORN MI 48126

Title            DIRECTOR  
Name            SCHESKE, MARGARET A.  
Address        1 AUTO CLUB DRIVE  
City-State-Zip: DEARBORN MI 48126

Title            VP CLAIMS  
Name            FUTCH, BOBBY S.  
Address        9125 HENDERSON ROAD  
City-State-Zip: TAMPA FL 33634

Title            VP, ASST. TREASURER  
Name            STEVENS, DION  
Address        1 AUTO CLUB DRIVE  
City-State-Zip: DEARBORN MI 48126

Title            VP, ASST. SECRETARY, CORPORATE  
                  COUNSEL  
Name            HANNEWALD, MARCIA L.  
Address        1 AUTO CLUB DRIVE  
City-State-Zip: DEARBORN MI 48126

Title            DIRECTOR, VC  
Name            RAQUET, JEANINE  
Address        1 AUTO CLUB DRIVE  
City-State-Zip: DEARBORN MI 48126

**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:** JOHN BRUNO

**SECRETARY**

**06/09/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR, EVP, SECRETARY, GENERAL  
                  COUNSEL, CHIEF HUMAN RESOURCE OFFICER

Name           BRUNO, JOHN

Address        1 AUTO CLUB DRIVE

City-State-Zip: DEARBORN MI 48126