

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000004816

Entity Name: US COASTAL PROPERTY & CASUALTY INSURANCE COMPANY**Current Principal Place of Business:**409 NW 138 TERR
JONESTOWN, FL 32669**Current Mailing Address:**P.O. BOX 357965
GAINESVILLE, FL 32635 US**FEI Number: 61-1778403****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
PO BOX 6200
200 E GAINES ST
TALLAHASSEE, FL 32314-6200 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 D
Name MCNITT, MICHAEL L
Address 409 NW 138 TERR
City-State-Zip: JONESTOWN FL 32669Title D
Name MCNITT, ROGER L
Address 409 NW 138 TERR
City-State-Zip: JONESTOWN FL 32669Title D
Name LOSHONKOHL, RONDA L
Address 409 NW 138 TERR
City-State-Zip: JONESTOWN FL 32669Title D
Name HERSHMAN, JEFFREY R
Address 409 NW 138 TERR
City-State-Zip: JONESTOWN FL 32669Title DIRECTOR
Name ROTH, RICHARD
Address 409 NW 138 TERR
City-State-Zip: JONESTOWN FL 32669

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: MICHAEL MCNITT

D

01/07/2021

Electronic Signature of Signing Officer/Director Detail

Date