Certificate of Status Desired: No

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

## Officer/Director Detail ·

Offic	er/Dire	ctor Detail :		
Title		PRESIDENT/CHIEF RISK OFFICER & DIRECTOR	Title	DIRECTOR
Name		SPRINGER, JON W	Name	WILENTZ, JOEL M
Addre	SS	1110 W COMMERCIAL BLVD	Address	1110 W COMMERCIAL BLVD
City-S	tate-Zip:	FT LAUDERDALE FL 33309	City-State-Zip:	FT LAUDERDALE FL 33309
Title Name Addres City-S		CEO & DIRECTOR DONAGHY, STEPHEN J 1110 W COMMERCIAL BLVD FT LAUDERDALE FL 33309	Title Name Address City-State-Zip:	EXECUTIVE CHAIRMAN DOWNES, SEAN P 1110 W COMMERCIAL BLVD FT LAUDERDALE FL 33309
Title Name Addres City-S		DIRECTOR SCHINDLER, OZZIE 1110 W COMMERCIAL BLVD FORT LAUDERDALE FL 33309	Title Name Address City-State-Zip:	CFO/TREASURER WILCOX, FRANK C 1110 W COMMERCIAL BLVD FT LAUDERDALE FL 33309
Title Name Addres City-S		DIRECTOR PIETRANGELO, MICHAEL 1110 W COMMERCIAL BLVD FT LAUDERDALE FL 33309	Title Name Address City-State-Zip: <b>Continues c</b>	DIRECTOR CALLAHAN, SCOTT P 1110 W COMMERCIAL BLVD FT LAUDERDALE FL 33309
			Sommues C	n page z

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: STEPHEN J. DONAGHY

CEO

09/11/2020

Electronic Signature of Signing Officer/Director Detail

Date

2020 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

# DOCUMENT# P97000094797

## Entity Name: UNIVERSAL PROPERTY & CASUALTY INSURANCE COMPANY

**Current Principal Place of Business:** 

## **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	PETERSON, RICHARD
Address	1110 W COMMERCIAL BLVD
City-State-Zip:	FT LAUDERDALE FL 33309
Title	DIRECTOR
Name	COOPER CAMPOS, KIMBERLY
Address	1110 W COMMERCIAL BLVD
City-State-Zip:	FT LAUDERDALE FL 33309
Title	COO
Name	POLOSKEY, MICHAEL J
Address	1110 W COMMERCIAL BLVD
City-State-Zip:	FT LAUDERDALE FL 33309

Title	DIRECTOR
Name	PALMIERI, RALPH
Address	1110 W COMMERCIAL BLVD
City-State-Zip:	FT LAUDERDALE FL 33309
Title	SECRETARY
Title Name	SECRETARY ROPIECKI, GARY
	02011211111