## 2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002862

Entity Name: AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION

"CORP."

FILED
Apr 23, 2019
Secretary of State
4551036284CC

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

8700 W BRYN MAWR AVE SUITE 1200S CHICAGO, IL 60631-3512

## **Current Mailing Address:**

8700 WEST BRYN MAWR AVENUE SUITE 1200S CHICAGO, IL 60631-3512 US

FEI Number: 20-0487810 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

Officer/Director Detail:

Title CEO Title SECRETARY

Name SAMPSON, DAVID Name HOWARD, CLAIRE

Address 8700 WEST BRYN MAWR AVENUE Address 8700 W BRYN MAWR AVE

SUITE 1200S SUITE 1200S

City-State-Zip: CHICAGO IL 60631-3512 City-State-Zip: CHICAGO IL 60631-3512

Title TREASURER
Name HOLMES, JUNE

Address 8700 WEST BRYN MAWR AVENUE

SUITE 1200S

City-State-Zip: CHICAGO IL 60631-3512

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLAIRE HOWARD

SENIOR VICE PRESIDENT, GENERAL COUNSEL AND CORPORA 04/23/2019