

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002862

FILED
Mar 30, 2022
Secretary of State
5458227925CC

Entity Name: AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION
"CORP."

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
Name: SAMPSON, DAVID
Address: 8700 WEST BRYN MAWR AVENUE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512

Title: SECRETARY
Name: HOWARD, CLAIRE
Address: 8700 W BRYN MAWR AVE
SUITE 1200S
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

Title: OFFICER
Name: BLUME, PAUL C JR.
Address: 8700 W BRYN MAWR AVE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512

Title: OFFICER
Name: GORDON, ROBERT M
Address: 8700 W BRYN MAWR AVE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512

Title: OFFICER
Name: HANNA, JESSICA HANSON
Address: 8700 W BRYN MAWR AVE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512

Title: OFFICER
Name: ZIELEZENSKI, STEPHEN M
Address: 8700 W BRYN MAWR AVE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512

Title: CFO
Name: WACHHOLZ, MARK
Address: 8700 W BRYN MAWR AVE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512

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

SIGNATURE: CLAIRE HOWARD

**CORPORATE
SECRETARY**

03/30/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name WIENECKE, NATHANIEL F
Address 8700 W BRYN MAWR AVE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512

Title OFFICER
Name JOYNER, SCOTT
Address 8700 W BRYN MAWR AVE
SUITE 1200S
City-State-Zip: CHICAGO IL 60631-3512