

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 803348

Entity Name: INSURANCE COMPANY OF NORTH AMERICA

Current Principal Place of Business:

436 WALNUT ST
PHILADELPHIA, PA 19106

Current Mailing Address:

436 WALNUT ST
PHILADELPHIA, PA 19106 US

FEI Number: 23-0723970

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
TALLAHASSEE, FL 32399-0000 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 DIRECTOR, PRESIDENT
Name LUPICA, JOHN J
Address 436 WALNUT ST
City-State-Zip: PHILADELPHIA PA 19106

Title DIRECTOR, EXECUTIVE VICE
PRESIDENT
Name ENGLISH, JAMES M
Address 436 WALNUT ST
City-State-Zip: PHILADELPHIA PA 19106

Title SECRETARY, VP
Name COLLINS, REBECCA L
Address 436 WALNUT STREET
City-State-Zip: PHILADELPHIA PA 19106

Title ASST. SECRETARY
Name SCHWEIDEL , JULIET
Address 436 WALNUT ST
WA04N
City-State-Zip: PHILADELPHIA PA 19106

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: JULIET SCHWEIDEL

ASSISTANT SECRETARY 01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date