

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 804876

**Entity Name:** COMBINED INSURANCE COMPANY OF AMERICA

**Current Principal Place of Business:**

8750 W. BRYN MAWR AVE.  
7TH FLOOR  
CHICAGO, IL 60631

**FILED**  
**Mar 05, 2018**  
**Secretary of State**  
**CC8048758734**

**Current Mailing Address:**

8750 W. BRYN MAWR AVE.  
7TH FLOOR  
CHICAGO, IL 60631 US

**FEI Number: 36-2136262**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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 P, DIRECTOR  
Name GOULDING, KEVIN  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

Title EVPD  
Name FAYNBERG, ALEX  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

Title SECRETARY  
Name COLLINS, REBECCA L  
Address 111 E. WACKER DRIVE  
6TH FLOOR  
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR  
Name CLANCY, EDWARD P.  
Address 1133 AVE OF THE AMERICAS  
City-State-Zip: NEW YORK NY 10036

Title SENIOR VICE PRESIDENT, DIRECTOR  
Name HALVERSON, BARBARA A.  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

Title WORKSITE SOLUTIONS PRESIDENT,  
DIRECTOR  
Name MARTIN, CHRISTOPHER J.  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

Title CFO, DIRECTOR  
Name CONNOLE, MIRIAM  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

Title CHIEF AGENCY OFFICER  
Name ABERCROMBIE, DOUGLAS J.  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

**Continues on page 2**

*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: REBECCA L. COLLINS**

**SECRETARY**

**03/05/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SENIOR VICE PRESIDENT  
Name BARG, JAEDE A.  
Address 595 SHREWSBURY AVE  
SUITE 205  
City-State-Zip: SHREWSBURY NJ 07702

Title SENIOR VICE PRESIDENT  
Name SAUVE, GUY  
Address 1570 RUE AMPERE  
STE 200  
City-State-Zip: BOUCHERVILLE, QUEBEC OC

Title SENIOR VICE PRESIDENT  
Name STEVEN, KETEL J.  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

Title SENIOR VICE PRESIDENT  
Name MALOY, NANCY  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631

Title SENIOR VICE PRESIDENT  
Name TAYLOR, JOHN PAUL  
Address 510 WALNUT ST.  
City-State-Zip: PHILADELPHIA PA 19106

Title GENERAL COUNSEL, DIRECTOR  
Name SIDDIQUI, SADAF  
Address 8750 W. BRYN MAWR AVE.  
7TH FLOOR  
City-State-Zip: CHICAGO IL 60631