Entity Name: GUIDEONE SPECIALTY MUTUAL INSURANEC COMPAN	IY
Current Principal Place of Business:	
1111 ASHWORTH RD	
WEST DES MOINES, IA 50265-0600	
Current Mailing Address:	
1111 ASHWORTH RD	
WEST DES MOINES, IA 50265-0600 US	
FEI Number: 42-0660911	Ce

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER DEPT. OF FINANCIAL SERVICES 200 E. GAINES ST. TALLAHASSEE, FL 32399 US

DOCUMENT# 812597

FILED Apr 08, 2020 Secretary of State 7580085551CC

Certificate of Status Desired: Yes

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 :

Officer/Director Detail :							
Title	SVP, SECRETARY	Title	DIRECTOR				
Name	NOGA, ANDREW	Name	SHAFF, KAREN E				
Address	1111 ASHWORTH RD	Address	1111 ASHWORTH RD				
City-State-Zip:	W DES MOINES IA 50265	City-State-Zip:	WEST DES MOINES IA 50265-0600				
Title	DIRECTOR	Title	DIRECTOR				
Name	HORAK, H L	Name	HENGESBAUGH, BERNARD				
Address	1111 ASHWORTH RD	Address	1111 ASHWORTH RD				
City-State-Zip:	WEST DES MOINES IA 50265-0600	City-State-Zip:	WEST DES MOINES IA 50265-0600				
Title	DIRECTOR	Title	DIRECTOR				
Title Name	DIRECTOR HEIDEN, CARA	Title Name	DIRECTOR MORETTE, ROBERT S				
Name Address	HEIDEN, CARA	Name	MORETTE, ROBERT S				
Name Address	HEIDEN, CARA 1111 ASHWORTH RD	Name Address	MORETTE, ROBERT S 1111 ASHWORTH RD				
Name Address City-State-Zip:	HEIDEN, CARA 1111 ASHWORTH RD WEST DES MOINES IA 50265-0600	Name Address City-State-Zip:	MORETTE, ROBERT S 1111 ASHWORTH RD WEST DES MOINES IA 50265-0600				
Name Address City-State-Zip: Title	HEIDEN, CARA 1111 ASHWORTH RD WEST DES MOINES IA 50265-0600 PRESIDENT	Name Address City-State-Zip: Title	MORETTE, ROBERT S 1111 ASHWORTH RD WEST DES MOINES IA 50265-0600 TREASURER				

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: ANDREW NOGA

SECRETARY

04/08/2020

Date

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	SNYDER, JESSICA	Name	HART, TODD
Address	1111 ASHWORTH RD	Address	1111 ASHWORTH RD
City-State-Zip:	WEST DES MOINES IA 50265-0600	City-State-Zip:	WEST DES MOINES IA 50265-0600
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR HARTWIG, ROBERT	Title Name	DIRECTOR BRIDGEWATER, DIANE