2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813936

Entity Name: NORTHLAND CASUALTY COMPANY

Current Principal Place of Business:

ONE TOWER SQUARE HARTFORD, CT 06183

Current Mailing Address:

ONE TOWER SQUARE HARTFORD, CT 06183 US

FEI Number: 94-6051964 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Mar 11, 2024

Secretary of State

0114035152CC

Officer/Director Detail:

Title DIRECTOR, PRESIDENT Title SEMINARA, NICHOLAS Name Name ONE TOWER SQUARE Address Address

HARTFORD CT 06183 City-State-Zip:

Title DIRECTOR Name HEYMAN, WILLIAM HERBERT

Address ONE TOWER SQUARE

City-State-Zip: HARTFORD CT 06183

Title **TREASURER**

Name

MILLS. LARRY Address 385 WASHINGTON STREET

ST. PAUL MN 55102 City-State-Zip:

Title DIRECTOR

TOCZYDLOWSKI, GREGORY C. Name

ONE TOWER SQUARE Address City-State-Zip: HARTFORD CT 06183 DIRECTOR

FREY, DANIEL S.

ONE TOWER SQUARE

City-State-Zip: HARTFORD CT 06183

Title CORPORATE SECRETARY

Name SKJERVEN, WENDY C

Address 385 WASHINGTON STREET

ST. PAUL MN 55102 City-State-Zip:

Title DIRECTOR

Name KALLA, CHRISTINE K. Address ONE TOWER SQUARE City-State-Zip: HARTFORD CT 06183

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: NICHOLAS SEMINARA

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/11/2024

Date