SIGNATURE: RANDY D. RINICELLA

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 818036

Entity Name: AVEMCO INSURANCE COMPANY

Current Principal Place of Business:

411 AVIATION WAY SUITE 100 FREDERICK, MD 21701

Current Mailing Address:

13403 NORTHWEST FREEWAY ATTN: DEBRA GREEN HOUSTON, TX 77040

FEI Number: 52-0795746

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST 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

Officer/Director Detail :				
Title	VD	Title	CFOD	
Name	WILLIAMS, CHRISTOPHER J	Name	MACDONOUGH, STEPHEN	
Address	13403 NORTHWEST FRWY	Address	13403 NORTHWEST FRWY	
City-State-Zip:	HOUSTON TX 77040	City-State-Zip:	HOUSTON TX 77040	
Title	VT	Title	CEOD	
Name	LEE, JONATHAN	Name	SCHELL, MICHAEL J	
Address	13403 NORTHWEST FRWY	Address	13403 NORTHWEST FRWY	
City-State-Zip:	HOUSTON TX 77040	City-State-Zip:	HOUSTON TX 77040	
Title	VSD	Title	PRESIDENT, DIRECTOR	
Name	RINICELLA, RANDY D	Name	DONOVAN, MICHAEL	
Address	13403 NORTHWEST FRWY	Address	13403 NORTHWEST FREEWAY ATTN: DEBRA GREEN	
City-State-Zip:	HOUSTON TX 77040	City-State-Zip:	HOUSTON TX 77040	

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

Certificate of Status Desired: No

VP AND SECRETARY 01/24/2013

Date

FILED Jan 24, 2013 Secretary of State CC8911810612

Date