2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2020
Secretary of State
6926546769CC

DOCUMENT# 819304

Entity Name: MAGNA INSURANCE COMPANY

Current Principal Place of Business:

ONE POINTE DRIVE, #120
BREA, CA 92821

Current Mailing Address:

ONE POINTE DRIVE, #120
BREA, CA 92821 US

FEI Number: 57-6037491

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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: MONICA GONZALEZ, SPECIAL SECRETARY 02/15/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	CFO, DIRECTOR
Name	WILSON, DAVID P.	Name	BRIDGES, AUDREY L.
Address	ONE POINTE DRIVE, #120	Address	ONE POINTE DRIVE, #120
City-State-Zip:	BREA CA 92821	City-State-Zip:	BREA CA 92821

Title	SECRETARY, CEO, DIRECTOR
Name	COLLIER, LISA M.
Address	ONE POINTE DRIVE, #120
City-State-Zip:	BREA CA 92821

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: COLLIER , LISA M. ANGELA MARTIN, ATTORNEY-IN-FACT 02/15/2020

Electronic Signature of Signing Officer/Director Detail — Date