2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2014
Secretary of State
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Entity Name: MAGNA INSURANCE COMPANY

Current Principal Place of Business:

10151 DEERWOOD PARK BLVD
BLDG 100 STE 330
JACKSONVILEL, FL 32256

Current Mailing Address:

10151 DEERWOOD PARK BLVD
BLDG 100 STE 330
JACKSONVILLE, FL 32256 US

FEI Number: 57-6037491

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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 04/14/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D	Title	S
Name	KAHLBAUGH, RICHARD S	Name	ROMAINE, CHRISTOPHER D
Address	10151 DEERWOOD PK BLVD BLDG 100 STE 330	Address	10151 DEERWOOD PK BLVD BLDG 100 STE 330
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JAKCSONVILLE FL 32256
Title	PD	Title	D
Name	BULLARD, DALE	Name	MCCAW, JOSEPH RII
Address	10151 DEERWOOD PK BLVD BLDG 100 STE 330	Address	10151 DEERWOOD PK BLVD BLDG 100 STE 330
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JAKCSONVILLE FL 32256
Title	T		
Name	VRBAN, MICHAEL		
Address	10151 DEERWOOD PK BLVD BLDG 100 STE 330		
City-State-Zip:	JACKSONVILLE FL 32256		

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: ROMAINE , CHRISTOPHER D BY: MONICA GONZALEZ ATTORNEY IN FACT 04/14/2014

Electronic Signature of Signing Officer/Director Detail — Date