2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836021

Entity Name: TRANSAMERICA CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

6400 C STREET SW
CEDAR RAPIDS, IA 52499

Current Mailing Address:

6400 C STREET SW
CEDAR RAPIDS, IA 52499 US

FEI Number: 31-4423946

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	DEPUTY SECRETARY
Name	OHL, JAMIE S	Name	MILLER-BREETZ, GREG
Address	1801 CALIFORNIA ST	Address	6400 C ST
City-State-Zip:	DENVER CO 80202	City-State-Zip:	CEDAR RAPIDS IA 52499

Title	D & SVP	Title	TREASURER, CFO, DIRECTOR
Name	SCHULZ, DAVID	Name	ASHE, CHRISTOPHER
Address	6400 C ST	Address	6400 C ST
City-State-Zip:	CEDAR RAPIDS IA 52499	City-State-Zip:	CEDAR RAPIDS IA 52499

Title	DIRECTOR, SECRETARY
Name	POLAK, KAREN
Address	100 LIGHT STREET FLOOR B1 FLOOR B1
City-State-Zip:	BALTIMORE MD 21202

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: GREG MILLER-BREETZ   DEPUTY SECRETARY   04/27/2022

Electronic Signature of Signing Officer/Director Detail | Date