

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 843478

**Entity Name:** UFG SPECIALTY INSURANCE COMPANY**Current Principal Place of Business:**455 E. MEDICAL CENTER BLVD, SUITE 400  
WEBSTER, TX 77598**Current Mailing Address:**118 SECOND AVE SE, P.O. BOX 73909  
CEDAR RAPIDS, IA 52407**FEI Number:** 74-1071857**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER  
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

Date

**Officer/Director Detail :**

Title P, D  
Name RAMLO, RANDY A  
Address 118 2ND AVE SE  
City-State-Zip: CEDAR RAPIDS IA 52407

Title VP,D  
Name WILKINS, MICHAEL T  
Address 118 SECOND AVE SE  
City-State-Zip: CEDAR RAPIDS IA 52407

Title T  
Name MARTIN, JANICE A  
Address 118 SECOND AVE SE  
City-State-Zip: CEDAR RAPIDS IA 52407

Title DIRECTOR  
Name JOHNSON, JOSEPH B  
Address 6115 WINNIE STREET  
City-State-Zip: GALVESTON TX 77550

Title C, D  
Name EVANS, JACK B  
Address 118 2ND AVE SE  
City-State-Zip: CEDAR RAPIDS IA 52407

Title DIRECTOR  
Name HELBING, KEVIN W  
Address 118 SECOND AVE. SE  
City-State-Zip: CEDAR RAPIDS IA 52407

Title S  
Name STAUFFER, KRISTIN R  
Address 118 SECOND AVE. SE  
City-State-Zip: CEDAR RAPIDS IA 52407

Title DIRECTOR  
Name SCHARMER, NEAL R  
Address 118 SECOND AVENUE SE  
PO BOX 73909  
City-State-Zip: CEDAR RAPIDS IA 52407-3909

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*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: KEVIN HELBING****DIRECTOR****01/21/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	SORENSEN, ALLEN R
Address	118 SECOND AVENUE SE P.O. BOX 73909
City-State-Zip:	CEDAR RAPIDS IA 52407-3909