

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843999

Entity Name: RESERVE NATIONAL INSURANCE COMPANY**Current Principal Place of Business:**601 E BRITTON ROAD
OKLAHOMA CITY, OK 73114**Current Mailing Address:**601 E BRITTON ROAD
OKLAHOMA CITY, OK 73114**FEI Number:** 73-0661453**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
Name	SCHALLHORN, ANDREW
Address	3737 EAST HEFNER ROAD
City-State-Zip:	OKLAHOMA CITY OK 73131

Title	D
Name	SCHALLHORN, ANDREW
Address	3737 EAST HEFNER ROAD
City-State-Zip:	OKLAHOMA CITY OK 73131

Title	D
Name	MINDAK, MAXWELL T
Address	ONE EAST WACKER DRIVE
City-State-Zip:	CHICAGO IL 60601

Title	VPS
Name	SNIDER, SCOTT
Address	14613 COLLINGWOOD LANE
City-State-Zip:	EDMOND OK 73013-1517

Title	VT
Name	BARTON, STACEY
Address	101 STONEBROOK WAY
City-State-Zip:	EDMOND OK 73003

Title	D
Name	SANDELSKI, DENNIS
Address	ONE EAST WACKER DRIVE
City-State-Zip:	CHICAGO IL 60601

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: STACEY BARTON**TREASURER****04/27/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date