

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844658

FILED
Jun 17, 2014
Secretary of State
CC4244154843

Entity Name: NATIONWIDE ASSURANCE COMPANY

Current Principal Place of Business:

ONE NATIONWIDE PLAZA
COLUMBUS, OH 43215

Current Mailing Address:

ONE NATIONWIDE PLAZA
COLUMBUS, OH 43215 US

FEI Number: 95-0639970

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 SENIOR VICE PRESIDENT
Name HANLEY, JENNIFER M.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title VP, TREASURER
Name DWYER, TIMOTHY J.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name BERVEN, MARK A.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title VP, SECRETARY
Name HORNER, ROBERT W. III
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title PRESIDENT
Name ARANGO, DAVID G.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name GUTIERREZ, MELISSA D.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name AUSTEN, W. KIM
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name LEX, MICHAEL A.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

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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: ROBERT W. HORNER, III

SECRETARY

06/17/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PIZZI, MARK A.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215