

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844772

Entity Name: PROGRESSIVE SPECIALTY INSURANCE COMPANY**Current Principal Place of Business:**6300 WILSON MILLS ROAD
MAYFIELD VILLAGE, OH 44143**Current Mailing Address:**P.O. BOX 5070
ATTN: LAW DEPARTMENT
CLEVELAND, OH 44101 US**FEI Number:** 34-1172685**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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 ASST. SECRETARY
Name CREWS, CHRISTINA L
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title DIRECTOR
Name BAILO, KAREN B
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title CHAIRMAN, DIRECTOR
Name LEMIEUX, KATHRYN M.
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title DIRECTOR
Name NIEHAUS, MARK D.
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title DIRECTOR
Name PRATT, DAVID L.
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title PRESIDENT, DIRECTOR
Name SOUSER, GEOFFREY T
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title SECRETARY
Name ALBERT, PETER J
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

Title TREASURER
Name BRENNAN, PATRICK S
Address 6300 WILSON MILLS ROAD
City-State-Zip: MAYFIELD VILLAGE OH 44143

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: CHRISTINA L CREWS

ASST. SECRETARY

05/01/2017

Electronic Signature of Signing Officer/Director Detail_____
Date