

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851719

Entity Name: UNITED AMERICAN INSURANCE COMPANY

Current Principal Place of Business:

3700 S STONEBRIDGE DR
MCKINNEY, TX 75070

Current Mailing Address:

3700 S. STONEBRIDGE DRIVE
MCKINNEY, TX 75070 US

FEI Number: 73-1128555

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
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 DIRECTOR
Name BARRETT, FRANCIS J
Address 3700 S STONEBRIDGE DR
City-State-Zip: MCKINNEY TX 75070

Title PRESIDENT, CEO
Name MAJORS, MICHAEL C
Address 1608 SUMMER OAKS DRIVE
City-State-Zip: ALLEN TX 75013

Title SECRETARY
Name SCARBOROUGH, JOEL P
Address 3700 S. STONEBRIDGE DRIVE
City-State-Zip: MCKINNEY TX 75070

Title TREASURER
Name HENRIE, M SHANE
Address 4600 ANISLEY DRIVE
City-State-Zip: PLANO TX 75024

Title SVP
Name ADAMS, JON A
Address 6333 BRYAN PARKWAY
City-State-Zip: DALLAS TX 75214

Title DIRECTOR
Name BARRETT, FRANCIS J
Address 3700 S. STONEBRIDGE DRIVE
City-State-Zip: MCKINNEY TX 75070

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: JON ADAMS

**DVL SVP, FIN REP &
CONT, ACCT FIN**

01/08/2021

Electronic Signature of Signing Officer/Director Detail

Date