**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Jan 16, 2020**
**Secretary of State**
**8795329793CC**

DOCUMENT# 857832

**Entity Name:** PARKER CENTENNIAL ASSURANCE COMPANY

**Current Principal Place of Business:**

1800 NORTH POINT DRIVE
STEVENS POINT, WI 54481

**Current Mailing Address:**

1800 NORTH POINT DRIVE
STEVENS POINT, WI 54481

**FEI Number: 31-0835312**

**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 | CHAIRMAN OF THE BOARD |
| Name | MCPARTLAND, PETER G |
| Address | 1800 NORTH POINT DRIVE |
| City-State-Zip: | STEVENS POINT WI 54481 |

| | |
|---|---|
| Title | SECRETARY, DIRECTOR |
| Name | KOBUSSEN, KIP J |
| Address | 1800 NORTH POINT DRIVE |
| City-State-Zip: | STEVENS POINT WI 54481 |

| | |
|---|---|
| Title | TREASURER |
| Name | GWIDT, PAUL M |
| Address | 1800 NORTH POINT DRIVE |
| City-State-Zip: | STEVENS POINT WI 54481 |

| | |
|---|---|
| Title | PRESIDENT, DIRECTOR |
| Name | SCHROEDER, TODD M |
| Address | 1800 NORTH POINT DRIVE |
| City-State-Zip: | STEVENS POINT WI 54481 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | WILLIAMS, MICHAEL J |
| Address | 1800 NORTH POINT DRIVE |
| City-State-Zip: | STEVENS POINT WI 54481 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | MCDONALD, JAMES E |
| Address | 1800 NORTH POINT DRIVE |
| City-State-Zip: | STEVENS POINT WI 54481 |

*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: TODD M SCHROEDER PRESIDENT 01/16/2020

Electronic Signature of Signing Officer/Director Detail — Date