

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001869

Entity Name: USAA CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

9800 FREDERICKSBURG RD.
SAN ANTONIO, TX 78288

Current Mailing Address:

9800 FREDERICKSBURG RD.
SAN ANTONIO, TX 78288

FEI Number: 59-3019540

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES STREET
TALLAHASSEE, FL 32399 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 PARKER, STUART B
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title VD
Name GANNON, ALICE H
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title DS
Name BENNETT, STEVEN A
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title CD
Name ROBLES, JOSUE JR.
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title DIRECTOR, PRESIDENT
Name BERGNER, KEVIN J
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title DIRECTOR
Name KRAPF, ALAN W
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title DIRECTOR, VP, ASST. SECRETARY
Name THOMAS, KRISTINE M
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title TREASURER
Name KIMBALL, DAVID K
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

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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: KAREN MORRIS

DIRECTOR, VP

03/20/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, VP, ASST. SECRETARY
Name MORRIS, KAREN
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title VP
Name ROSILIER, JOHN D
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title VP
Name REGISTER, KIRSTEN M
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288

Title VP
Name WAGEMAN, PATRICK A
Address 9800 FREDERICKSBURG RD.
City-State-Zip: SAN ANTONIO TX 78288