## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003862

**Entity Name: AMERICAN SERVICE INSURANCE COMPANY** 

Jan 22, 2018 Secretary of State CC5729799762

**FILED** 

## **Current Principal Place of Business:**

953 AMERICAN LANE, 3RD FLOOR SCHAUMBURG. IL 60173

## **Current Mailing Address:**

953 AMERICAN LANE, 3RD FLOOR

ATTN: D. JENKINS. CORPORATE COMPLIANCE SUPERVISOR

SCHAUMBURG, IL 60173 US

FEI Number: 36-3223936 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST. 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 DIR, PRES, CEO Title DIR, SEC, VP

Name WOLLNEY, SCOTT D Name DIMAGGIO, LESLIE P

Address 953 AMERICAN LANE, 3RD FLOOR Address 953 AMERICAN LANE, 3RD FLOOR

City-State-Zip: SCHAUMBURG IL 60173 City-State-Zip: SCHAUMBURG IL 60173

Title DIR, VP Title DIR, CFO, VP

Name GILES, BRUCE W Name ROMANO, PAUL A

Address 953 AMERICAN LANE, 3RD FLOOR Address 953 AMERICAN LANE, 3RD FLOOR

City-State-Zip: SCHAUMBURG IL 60173 City-State-Zip: SCHAUMBURG IL 60173

Title DIR, VP

Name SHUGRUE, JOSEPH R

Address 953 AMERICAN LANE, 3RD FLOOR

City-State-Zip: SCHAUMBURG IL 60173

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: LESLIE DIMAGGIO

SECRETARY

01/22/2018