

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003499

Entity Name: ATAIN INSURANCE COMPANY**Current Principal Place of Business:**30833 NORTHWESTERN HWY.
SUITE 220
FARMINGTON HILLS, MI 48334**Current Mailing Address:**30833 NORTHWESTERN HWY.
SUITE 220
FARMINGTON HILLS, MI 48334**FEI Number:** 31-1674992**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 PRESIDENT & DIRECTOR
Name BATES, WAYNE A
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title SECRETARY, DIRECTOR
Name KAUFMAN, DANIEL JOSHUA
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title VP
Name MANUELIDIS, EMMANUEL E
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title DIRECTOR
Name SHAEVSKY, MARK
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title VP, TREASURER, CFO
Name MARTIN, MICHAEL O
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title CEO, DIRECTOR, & ASSISTANT
 SECRETARY
Name MULDOWNNEY, DANIEL T
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title DIRECTOR
Name KAUFMAN, ALAN J
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title DIRECTOR
Name DAVIS, JODIE K
Address 30833 NORTHWESTERN HWY.
 SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

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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: MICHAEL O MARTINSR VP, TREASURER &
CFO

01/07/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name VANEGMOND, DAVID ARTHUR
Address 30833 NORTHWESTERN HWY.
SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title VP & CHIEF COMPLIANCE OFFICER
Name JOHANSON, KORI M
Address 30833 NORTHWESTERN HWY.
SUITE 220
City-State-Zip: FARMINGTON HILLS MI 48334